Resilient, Strong Communities

LAYING THE FOUNDATION FOR HEALTH EQUITY
FEBRUARY 22–24 | SEATTLE, WASHINGTON

www.NWRPCA.org/event/wf18
Welcome
to the Emerald City for our 2018 Western Forum for Migrant and Community Health!

On behalf of Northwest Regional Primary Care Association, I’d like to thank you for joining us here at this critical time in the health center movement.

This year’s theme — RESILIENT, STRONG COMMUNITIES: LAYING THE FOUNDATION FOR HEALTH EQUITY — reminds us of the power of relentless collective action and persistent unified voices. Ultimately, it’s the resilient community that creates sustainable, lasting change. Throughout the 50+ years of the health center movement, Community Health Centers (CHCs) have been at the forefront of creating this type of change. Although the current political climate nationally has caused uncertainty, we know that this is a resilient movement and our commitment to serve is unwavering.

We’re confident you’ll enjoy our 2018 Forum and the over 30 timely sessions aimed at improving agricultural worker health, community health worker programs, community health policy, leadership development, and more. Among the highlights of this year’s Forum are truly outstanding opening and closing plenaries. The opening plenary offers a panel discussion with Lorena González, Seattle City Councilmember; Jorge L. Barón, Executive Director of the Northwest Immigrant Rights Project; and Dr. Julian Perez, a Family Physician with Sea Mar Community Health Centers, while the closing plenary features a keynote by award-winning writer, research scholar, and performance artist Tim Z. Hernandez, who was recently named one of sixteen New American Poets by the Poetry Society of America. All four of these remarkable individuals bring a passion for the issues highlighted in this Forum that’s firmly rooted in their own personal backgrounds and professional experiences.

And it’s that same passion that we feel so fortunate to experience in and through all of you each and every year at the Forum. Thank you again for joining us and, even more importantly, for serving so diligently to advance the vision of true health, wellness, and well-being for the patients and communities we serve.

Bruce Gray
Chief Executive Officer
NWRPCA

This project content is supported by the Health Resources and Services Administration (HRSA) of the U.S. Department of Health and Human Services (HHS) under grant number U58CS06846, “S/RPCAs,” total award $900K, with 65 percent of program funded by nongovernmental sources. This information or content and conclusions are those of the author and should not be construed as the official position or policy of, nor should any endorsements be inferred by HRSA, HHS or the U.S. Government.
## Conference AGENDA

**at a glance**

### Thursday
- **Conference Registration** 7–8 a.m.
  Courtyard Ballroom, B Level
- **Continental Breakfast** 7–8 a.m.
  Salon A, 2nd Floor
- **Opening Plenary** 8–10 a.m.
  Courtyard Ballroom, B Level
- **Break with Exhibitors** 10–10:30 a.m.
  Salon A, 2nd Floor
- **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.
  Salon A, 2nd Floor
- **Conference Sessions** 3:30–5 p.m.
- **Poster Session** 5–6:30 p.m.
  Madison Ballroom Foyer, 2nd Floor
- **Welcome Reception with Music and Appetizers** 6:30–8:30 p.m.
  Vista, 28th Floor

### Friday
- **Conference Registration** 7–8 a.m.
  Courtyard Ballroom, B Level
- **Continental Breakfast** 7–8 a.m.
  Salon A, 2nd Floor
- **Conference Sessions** 8:30–10 a.m.
- **Break with Exhibitors** 10–10:30 a.m.
  Salon A, 2nd Floor
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- **Lunch on Your Own** 12–1:30 p.m.
- **Conference Sessions** 1:30–3 p.m.
- **Dessert Break with Exhibitors** 3–3:30 p.m.
  Salon A, 2nd Floor
- **Conference Sessions** 3:30–5 p.m.
- **Networking Reception & Raffle** 5–7 p.m.
  Salon A, 2nd Floor

### Saturday
- **Conference Registration** 7–8 a.m.
  Courtyard Ballroom, B Level
- **Continental Breakfast** 7–8 a.m.
  Salon A, 2nd Floor
- **Conference Sessions** 8:30–10 a.m.
- **Break with Exhibitors** 10–10:30 a.m.
  Salon A, 2nd Floor
- **Conference Sessions** 10:30–12 p.m.
- **Closing Lunch Plenary** 12:15–2 p.m.
  Courtyard Ballroom, B Level

## ACCESS CONFERENCE MATERIALS ONLINE

Access to session information, including supporting documents, can be found here:

>> [www.nwrpca.org/my-events] <<

If you’re 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 to secure your access. If you have any questions regarding the log-in please check with the registration desk.
We are grateful for the support of our sponsors.

NWRPCA’s Annual Sponsors

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Conference Sponsors

CONTINUING EDUCATION

In order to receive CEUs, please sign in and sign out from each session. 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)
Northwest Regional Primary Care Association is designated as an Approved PACE Program Provider by the Academy of General Dentistry. The formal continuing education programs of this program provider are accepted by AGD for Fellowship, Mastership and membership maintenance credit. Approval does not imply acceptance by a state or provincial board of dentistry or AGD endorsement. The current term of approval extends from 2017-2019. Provider ID# 216328

NACHC UPDATE

JOE GALLEGOS
Senior Vice President of Western Operations
NACHC

HRSA UPDATE

TIA-NICOLE LEAK, PH.D.
Team Lead, National Partnerships Team/National Cooperative Agreements (NCAs)
Bureau of Primary Health Care, HRSA
LORENA GONZALEZ is currently a Seattle Councilmember. As one of two at-large (citywide) representatives and the first Latina/o elected to serve the Seattle City Council, Councilmember M. Lorena González comes to us with a decade of experience as a civil rights attorney and community advocate. She is a nationally-recognized civil rights leader and recently served as legal counsel to Seattle Mayor Ed Murray.

Born and raised in Washington’s lower Yakima Valley to a Spanish-speaking migrant farmworker family, Councilmember González earned her first paycheck at the age of 8, alongside her parents and five siblings. She relied on scholarships and worked 3 jobs to attend community college and later Washington State University. She moved to Seattle in 2002 to attend Seattle University Law School, where she graduated with honors in 2005.

Jorge L. Barón has served as the executive director of the Northwest Immigrant Rights Project (NWIRP) since April 2008, having previously worked as a staff attorney with the organization for two years. Jorge’s passion in advocating on behalf of immigrants is firmly rooted in his own immigrant experience: he is originally from Bogotá, Colombia, and came to the United States at the age of thirteen. Jorge is a graduate of Yale Law School and Duke University and lives in Seattle with his wife Tyler and their three children, Isabella, Luna, and Luca.

Dr. Julian Perez has served as a Family Physician with Sea Mar Community Health Center since 2007. He holds a Bachelor’s degree in Zoology with a minor in Spanish from the University of Idaho, and his Doctor of Medicine degree from the University of Washington School of Medicine (2004). He completed his Family Medicine Residency with in 2007 and his Sports Medicine Fellowship in 2016 with Swedish Family Medicine at Cherry Hill, in Seattle. He is board certified in Family Medicine, Sports Medicine and Musculoskeletal Ultrasonography.

Tim Z. Hernandez is an award winning writer, research scholar, and performance artist. The author of six books, including poetry, historical fiction, and non-fiction, Hernandez is the recipient of an American Book Award, the Colorado Book Award, and the International Latino Book Award. His work has been featured in the Los Angeles Times, the New York Times, CNN, National Public Radio, and on C-Span’s Book TV.

Named one of sixteen New American Poets by the Poetry Society of America, he was a finalist for the inaugural Split This Rock Freedom Plow Award for his work on locating the victims of the 1948 plane wreck at Los Gatos Canyon, the incident made famous by Woody Guthrie’s song of the same name. The result of this work is the basis for his newly released book, All They Will Call You (University of Arizona Press). Hernandez holds a B.A. from Naropa University and an M.F.A. from Bennington College. He is currently an Assistant Professor at the University of Texas El Paso’s Bilingual M.F.A. Program in Creative Writing.

Closing Performance by Joyas Mestizas
AMERIGROUP
SUPPORTING SPONSOR
Amerigroup Washington leads the way in building meaningful relationships in the community and creating extra services to improve health care for our members. We believe health care only starts with the best doctors but to really improve health outcomes we have to invest in addressing social determinants of health.
Jahangeer Khan
Jahangeer.Khan@amerigroup.com
www.amerigroup.com

AREA HEALTH EDUCATION CENTER FOR WESTERN WASHINGTON (AHECWW)
The Area Health Education Center for Western Washington (AHECWW) works with the national AHEC movement to support health care delivery systems and access to care through activities that strengthen the health care workforce in rural and urban-underserved communities. Table 17
Cori Garcia Hansen
CGarcia-hansen@whatcom.edu
ahecww.org

CERTINTELL
Improve patient satisfaction scores, decrease no-shows/missed appointments, and improve patient outcomes in your medical home. Our HIPAA-compliant platform allows FQHCs, to offer secure text messaging, image sharing and video visits to patients via mobile devices and web browsers. Table 9
Ben Lefever
benjamin@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 FQHCs for their family’s health. Table 6
Stacey Emmons
info@ccha.org
www.theccha.org

ECLINICALWORKS
eClinicalWorks helps 800 health centers nationwide deliver affordable, evidence-based care, with patient communication, referral management, hospital interoperability, population health, UB04 billing, UDS reports, and more. Table 13
Kelli Smith
kelli.smith@eclinicalworks.com
www.eclinicalworks.com

FDA OFFICE OF MINORITY HEALTH
The FDA Office of Minority Health mission is to promote and protect the health of diverse populations through research and communication of regulatory science that addresses health disparities. Table 10
Mary Ellen Taylor
maryellen.taylor@fda.hhs.gov
www.fda.gov

FLORIDA STATE UNIVERSITY
The FSU Center for Child Stress & Health provides clinical resource for patients, families, and health care providers on the prevention and treatment of child trauma and toxic stress — with a focus on rural, minority, and migrant farm-working communities. The Center is a partner in SAMHSA’s National Child Traumatic Stress Network. Table 16
Ashley Butler
fsustress@med.fsu.edu
www.fsustress.org

GILEAD, HCV CAN BE CURED
You have an important role in shattering HCV. At the Gilead booth or HCVcanbecured.com, learn about the increasing impact of chronic Hepatitis C, how it can be cured, and the role of primary care providers to lead patients to cure by screening, diagnosing, and referring patients to an HCV treater. Table 8
Lisa Talbott
Lisa.Talbott@gilead.com
www.hcvcanbecured.com
GLAXOSMITHKLINE
We are a science-led global health care company with a special purpose: to help people do more, feel better, and live longer. Table 22
Breelyn Young
Breelyn.c.young@gsk.com
www.gsk.com

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. Table 15
Kokaale Amissah-Aidoo
Hesperian@hesperian.org
www.hesperian.org

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
» Evaluate your patient education materials and communications (field testing with focus groups and one-on-one interviews)
» Sponsor and administer the health literacy discussion list
Table 20
Andrew Pong
APong@iha4health.org
www.iha4health.org

JBS INTERNATIONAL, INC. NATIONAL AGRICULTURAL WORKERS SURVEY
JBS International has been contracted with the Department of Labor for 29 years directing the National Agricultural Workers Survey (NAWS). The NAWS is an employment-based, random sample survey of U.S. crop workers that collects demographic, employment, and health data in face-to-face interviews. Table 18
Susan Gabbard
sgabbard@jbsinternational.com
www.doleta.gov/naws

KAISER PERMANENTE
CONFERENCE CHAMPION SPONSOR
At Kaiser Permanente, our mission is to provide high-quality, affordable health care and improve the health of our members and the communities we serve. Our definition of health includes physical, mental and emotional, or — more simply put — total health. We stand for total health for all.
Victoria García Tamayo
garcia.v@ghc.org
healthy.kaiserpermanente.org

MEDIQUIRE
MediQuire’s population health and pay-for-performance analytics platform guides health centers to improve patient outcomes and maximize incentives under value-based care. Our proprietary technology ensures quality measures and UDS reports are accurately measured by incorporating both discrete and non-discrete EHR data, while delivering actionable patient insights at the point of care. Table 3
Dante Rankart
drankart@mediquire.com
www.mediquire.com

MIGRANT CLINICIANS NETWORK
CONTINUING EDUCATION NURSING SPONSOR
Migrant Clinicians Network is a 501(c)3 nonprofit organization that creates practical solutions at the intersection of poverty, migration, and health. We provide case management, patient navigation, technical assistance, and professional development to clinicians in FQHCs and other health care delivery sites with the ultimate purpose of improving care. Table 11
Jillian Hopewell
jhopewell@migrantclinician.org
www.migrantclinician.org

MOLINA HEALTHCARE
Molina’s mission is to provide quality health services to financially vulnerable families and individuals covered by government programs. Molina Healthcare is an innovative national health care leader, providing quality care and accessible services in an efficient and caring manner. Table 4
Katterine Nazario
Katterine.Nazario-Vasquez@Molinahealthcare.com
www.molinahealthcare.com
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 Health Centers (CHCs) nationwide, as well as organizations, universities, researchers, and individuals involved in farmworker health.

Lisa Miller
miller@ncfh.org
www.ncfh.org

The National Library of Medicine (NLM) promotes access to biomedical information to health professionals and to the public. NLM resources, including PubMed, Clinical Trials, and MedlinePlus, are free of charge to everyone. Stop by for a demonstration.

Patricia Devine
devine@uw.edu
nlm.gov/pnr

The NAPCP seeks to establish and maintain an affiliation of like-minded primary care naturopathic physicians, so organized and controlled by qualified members, that this fact shall be apparent to other physicians, legislators, regulators, insurers and to the public at large. As new NWRPCA members, NAPCP would like to expand hiring of NDs into CHCs.

Hannah Gordon
napcpinfo@gmail.com
www.ndprimarycare.org

By integrating design and construction for project delivery, Neenan Archistruction collaborates with CHCs to produce more than just a clinic. We create health care facilities that significantly improves staff satisfaction and recruitment, increases productivity, operational flexibility, and communication so that their patients can experience the very best health care possible.

Steve Barnes
steve.barnes@neenan.com
www.neenan.com

The Pacific Northwest Agricultural Safety and Health Center conducts research and promotes best health and safety practices for Northwest producers and workers in farming, fishing, and forestry. Affiliated with the UW School of Public Health, PNASH integrates expertise from multiple disciplines, institutions, and community partners. Areas of emphasis include new production technologies and the needs of underserved and vulnerable populations.

Marcy Harrington
206-685-8962
dehos.washington.edu/pnash

The Department of Health Services prepares future health practitioners, managers, and researchers to conduct the unfinished work of improving the well-being of communities in the United States and throughout the world. We offer eight graduate degrees, including a PhD, MS, and MHA, as well as online and on-campus MPH options.

Lauren Brackenbury
hservask@uw.edu
deps.washington.edu/hserv

United Healthcare Community Plan is pleased to provide Washington Apple Health (Medicaid), Special Needs Plans, and other federal and state health care programs to individuals and families throughout Washington. We aim to make government-sponsored health care a better experience for our members and are committed to providing benefits and services that help our members take charge of their health.

Amina Suchoski
Amina_suchoski@uhc.com
www.UHCCommunityPlan.com

Keep Washington safe and working. Washington State Department of Labor and Industries is a diverse agency dedicated to the safety, health, and security of Washington’s 2.5 million workers. We help employers meet safety and health standards, and we inspect workplaces when alerted to hazards.

Lilia Gomez
Goml235@Lni.wa.gov
www.lni.wa.gov
Visit our EXHIBITORS
IN SALON A, 2ND FLOOR

1. United HealthCare
2. NWRPCA/ATSU
3. MediQuire
4. Molina Healthcare
5. Department of Health Services, UW School of Public Health
6. Chiropractic Community Health Alliances
7. Neenan Archistruction
8. Gilead
9. Certintell
10. FDA Office of Minority Health
11. Migrant Clinicians Network
12. WA State Department of Labor & Industries
13. eClinical Works
14. Pacific Northwest Agricultural Safety and Health (PNASH) Center
15. Hesperian
16. Florida State University
17. Western WA AHEC
18. DOL/JBS
19. National Network of Libraries of Medicine
20. Institute for Healthcare Advancement
21. Naturopathic Academy of Primary Care Physicians
22. GlaxoSmithKline
**THURSDAY, FEBRUARY 22, 2018**

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<thead>
<tr>
<th>Time</th>
<th>Event</th>
<th>Location</th>
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<tbody>
<tr>
<td>7–8 a.m.</td>
<td>Continental Breakfast • Salon A, 2nd Floor</td>
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<tr>
<td>7–8 a.m.</td>
<td>Registration • Courtyard Foyer, B Level</td>
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<tr>
<td>8–10 a.m.</td>
<td>Opening Plenary • Panel Discussion with Lorena Gonzalez, Seattle City Councilmember; Jorge Barón, Executive Director, Northwest Immigrant Rights Project; Dr. Julian Perez, Family Physician, Sea Mar Community Health Center • Courtyard Ballroom, B Level</td>
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<tr>
<td>10–10:30 a.m.</td>
<td>Break with Exhibitors • Salon A, 2nd Floor</td>
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<tr>
<td>10:30 a.m.–12 p.m.</td>
<td>Conference Sessions</td>
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<tr>
<td><strong>FOUNDATIONS OF AGRICULTURAL WORKER HEALTH</strong></td>
<td><strong>POLICY &amp; ENVIRONMENT</strong></td>
<td><strong>COMMUNITY PARTNERING FOR HEALTH</strong></td>
</tr>
</tbody>
</table>
| 1 - Starting from the Beginning: Agricultural Worker Health 101 | Kristen Stoimenoff, Health Outreach Partners; Alexis Guild, Farmworker Justice; Sylvia Partida, National Center for Farmworker Health |  | 4 - Fields → Home → Clinic: Responding to Pesticide Exposures
Maria Blancas & Pablo Palmandez, Pacific Northwest Agricultural Safety and Health Center; Anne Katten, California Rural Legal Assistance Foundation; Jillian Hopewell, Migrant Clinicians Network; Virginia Ruiz, Farmworker Justice |
| 2 - Welcoming and Serving All Patients: What Health Centers Need to Know * | Roger Rosenthal, Migrant Legal Action Program |  |  |  |
| 3 - Culturally Sensitive Programming for the Vulnerable | Lorena Verdugo & Ernie Perez, El Rio Health Center |  |  |  |
| **SALON B** | **MUNICIPAL** | **FEDERAL** | **SALON C** |
| 12–1:30 p.m. | Lunch On Your Own |  |  |
| **5–6:30 p.m.** | **Poster Session** | **6:30–8:30 p.m.** | Welcome Reception • Vista, 28th Floor |
| **10–11 a.m.** | **Break with Exhibitors** | **11–12 p.m.** | **Conference Sessions** |

*Interpretation services available
### Friday, February 23, 2018

**7–8 a.m. • Continental Breakfast • Salon A, 2nd Floor**

**7–8 a.m. • Registration • Courtyard Foyer, B Level**

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

<table>
<thead>
<tr>
<th>MENTAL HEALTH</th>
<th>WOMEN &amp; CHILDREN’S HEALTH</th>
<th>COMMUNITY HEALTH WORKER WORKFORCE</th>
<th>RESEARCH &amp; COMMUNITY–ACADEMIC PARTNERSHIPS</th>
</tr>
</thead>
<tbody>
<tr>
<td>13 - HHS Priority on Mental Health: Supporting Mental Health in Vulnerable Populations *</td>
<td>14 - Using Promotores(as) De Salud to Address Intimate Partner Violence in Rural Communities</td>
<td>15 - Profile of Community Health Workers (CHWs)</td>
<td>16 - Migratory Populations: Who Are They? Are They Healthy?</td>
</tr>
<tr>
<td>Lesley Steinman, UW; Christopher Blodgett, WSU; Bethany Applebaum, HRSA</td>
<td>Laura Macia, MHP Salud</td>
<td>Maria Blancas, Pacific Northwest Agricultural Safety and Health Center; Seth Doyle, NWRPCA</td>
<td>Liliana Osorio, UC Berkeley</td>
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**MUNICIPAL**

### 10–10:30 a.m. • Break with Exhibitors • Salon A, 2nd Floor

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

| 17 - Integrating CHWs to Address Mental Health Issues among Children and Families Served by Community Health Centers (CHCs) * | 18 - Understanding Barriers Faced by Indigenous Mexican and Guatemalan Women to Access Prenatal Care in Skagit and Whatcom Counties | 19 - CHWs: Current Workforce Trends and Developments                                                                 | 20 - Creating Culturally Competent Services to Improve Health for Migratory Populations |
| Elizabeth Oseguera, California PCA; Aracely Navarro, Children’s Partnership; Angela O’Brien, Community Health Center Network | Colleen Pacheco, Sea Mar CHC                                                                 | Carl Rush, Community Resources; Cherise Fowler, Alaska PCA, Laura Macia, MHP Salud; Luis Lagos, Family Residency of Idaho | Jessica Joanne Currier, OHSU, PSU School of Public Health |

**MUNICIPAL**

### 12–1:30 p.m. • Lunch On Your Own

### 1:30–3 p.m. • Conference Sessions

| 21 - Supporting CHWs, the First Responders to Community Crisis * | 22 - HHS Priority on Childhood Obesity: Strategies and Best Practices in Promoting Healthy Weight | 23 - Lessons from the Field: Successes and Challenges of Integrating CHWs at Primary Care Clinics | 24 - Strategies to Enhance Health Data Collection at CHCs in a "Superdiverse" Society |
| Martha Lucia Garcia, Marist College; Elizur Bello & Lorena Sprager, The Next Door | Brie Davis, YMCA of Greater Seattle; Eli Mancillas, MHP Salud; Carrie Glover, Childhood Obesity Prevention Coalition; Carolyn Gleason, HRSA | Andrew Taylor & Sarah Salomon, Foundation for Healthy Generations | Alfonso Rodriguez-Lainz, Centers for Disease Control and Prevention; Sylvia Partida, National Center for Farmworker Health |

**MUNICIPAL**

### 3–3:30 p.m. • Dessert Break with Exhibitors • Salon A, 2nd Floor

### 3:30–5 p.m. • Conference Sessions

| 25 - Strengthening the Promotor through Self-Care * | 26 - Supporting the Health and Well-Being of Women | 27 - Return on Investment of a CHW Program for Super-Utilizer Medicaid Members in a Nevada Managed Care Organization | 28 - Community Collaboration in Health and Migration Research |
| Gerry Balcazar & Arizbe Garcia, Visión y Compromiso | Kobale Amissah-Aidoo, Hesperian Health Guides | Elizabeth Christiansen, UN Reno; Masako Horino Berger, Nevada Division of Public and Behavioral Health | Bonnie Bade & Noemi Jara, CSU San Marcos |

### 5–7 p.m. • Networking Reception & Raffle • Salon A, 2nd Floor

*Note: Interpretation services available*
SATURDAY, FEBRUARY 24, 2018

<table>
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<tr>
<th>Time</th>
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<tbody>
<tr>
<td>7–8 a.m.</td>
<td>Bailoterapia, Visión y Compromiso • Superior, B Level</td>
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<td>Continental Breakfast • Salon A, 2nd Floor</td>
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<tr>
<td>8:30–10 a.m.</td>
<td>Conference Sessions</td>
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**CLINICAL TOPICS IN PUBLIC HEALTH**

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<thead>
<tr>
<th>Session</th>
<th>Title</th>
<th>Presenters</th>
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<tr>
<td>29</td>
<td>Innovative Strategies for Addressing Hepatitis C in Washington State</td>
<td>Jon Stockton &amp; Nicole Dronen, WA State Department of Health</td>
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<tr>
<td>30</td>
<td>Expanding the Reach of Care: Utilizing Health Education for Diabetes Prevention and Control</td>
<td>Edith Hernandez, Health Outreach Partners; Eli Mancillas, MHP Salud</td>
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<tr>
<td>31</td>
<td>Resources for Community Health Workers (CHWs): Using Social Media to Expand Communication</td>
<td>Patricia Devine, National Library of Medicine, UW</td>
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<tr>
<td>32</td>
<td>Figure Drawing to Support Oral Health Education for CHWs *</td>
<td>Gino Aisenberg, UW School of Social Work; Allen Cheadle, Kaiser Permanente Research Institute</td>
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**HEALTH EDUCATION & PATIENT ENGAGEMENT**

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<tr>
<th>Session</th>
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<tr>
<td>33</td>
<td>HHS Priority on Opioids: Strategies to Address Opioid Misuse and Abuse</td>
<td>Laura-Mae Baldwin, UW; Yvonne Elmendorf, Consejo Counseling and Referral Service</td>
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<tr>
<td>34</td>
<td>Improving Patient Satisfaction and Experience through the Integration of Cultural Competency and Communication Skills</td>
<td>Alicia Gonzales, National Center for Farmworker Health</td>
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<tr>
<td>35</td>
<td>Digital Storytelling: A Tool to Promote Health Equity</td>
<td>Martha Moore Monroy &amp; Ada Wilkinson-Lee, UA; Floribella Redondo, AZCHOW; Antoinette Angulo, Creative Narrations; Patty Molina, Mariposa Community Health Center</td>
</tr>
<tr>
<td>36</td>
<td>DentistLink.org: A New Tool to Increase Dental Access *</td>
<td>Karen Davis &amp; Laura Flores Cantrell, Arcora Foundation; Jessica Pearson, Unify Community Health</td>
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**MEDIA & COMMUNICATIONS**

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<th>Session</th>
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<td>32</td>
<td>Figure Drawing to Support Oral Health Education for CHWs *</td>
<td>Gino Aisenberg, UW School of Social Work; Allen Cheadle, Kaiser Permanente Research Institute</td>
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**ORAL HEALTH**

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**SALON B**

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<tr>
<td>10–10:30 a.m.</td>
<td>Break with Exhibitors • Salon A, 2nd Floor</td>
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**10:30 a.m.–12 p.m. • Conference Sessions**

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<td>33</td>
<td>HHS Priority on Opioids: Strategies to Address Opioid Misuse and Abuse</td>
<td>Laura-Mae Baldwin, UW; Yvonne Elmendorf, Consejo Counseling and Referral Service</td>
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<td>34</td>
<td>Improving Patient Satisfaction and Experience through the Integration of Cultural Competency and Communication Skills</td>
<td>Alicia Gonzales, National Center for Farmworker Health</td>
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<td>35</td>
<td>Digital Storytelling: A Tool to Promote Health Equity</td>
<td>Martha Moore Monroy &amp; Ada Wilkinson-Lee, UA; Floribella Redondo, AZCHOW; Antoinette Angulo, Creative Narrations; Patty Molina, Mariposa Community Health Center</td>
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<td>36</td>
<td>DentistLink.org: A New Tool to Increase Dental Access *</td>
<td>Karen Davis &amp; Laura Flores Cantrell, Arcora Foundation; Jessica Pearson, Unify Community Health</td>
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**SALON B**

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<tr>
<td>12:15–2 p.m.</td>
<td>Closing Lunch Plenary • Tim Z. Hernandez, Author of All They Will Call You; Performance by Joyas Mestizas • Courtyard Ballroom, B Level</td>
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*Interpretation services available

**INTERPRETATION SERVICES**

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1 - STARTING FROM THE BEGINNING: AGRICULTURAL WORKER HEALTH 101

This workshop offers a comprehensive orientation to the Migrant Health program in the United States. Whether you are new to the migrant health field or someone that needs a refresher, join us for a look into the fascinating world of the health care program for agricultural workers and their families. In this workshop you will learn the 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.

Learning Objectives:
1. Identify the agricultural worker population and the challenges of agricultural 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 agricultural workers.
3. Describe the multitude of resources available to health centers nationwide to access training and technical assistance.

Presenters: Alexis Guild, Farmworker Justice; Kristen Stoimenoff, Health Outreach Partners; Sylvia Partida, National Center for Farmworker Health

2 - WELCOMING AND SERVING ALL PATIENTS: WHAT HEALTH CENTERS NEED TO KNOW

CEUs: CME, CNE, NASW

As the population served by Community Health Centers (CHCs) becomes more diverse, it is necessary for health center staff to better understand the complexity of this diversity. This session will focus on explaining the complex laws and policies that impact many foreign-born patients served by health centers. The presenter will review agencies responsible for various programs and policies impacting these patients, including migratory and seasonal agricultural workers (MSAW) and their families. The goal of this session is to provide health center staff with clear and basic information that will allow them to better assist foreign-born patients and their families. This information will be immediately usable in undertaking outreach, intake, and planning health center programs.

Learning Objectives:
1. Understand the current status of policies impacting the MSAW patient population.
2. Explain those policies to patients and their families, and try to correct misunderstandings and protect families from unscrupulous individuals.
3. Design health programs/service delivery, intake, and outreach activities to maximize patient access and participation.

Presenter: Roger Rosenthal, Migrant Legal Action Program
3 - CULTURALLY SENSITIVE PROGRAMMING FOR THE VULNERABLE

CEUs: CME, CNE, NASW

This presentation will provide an overview and specific examples of a culturally sensitive, bi-national curriculum created by the University of Arizona College of Public Health in collaboration with El Colegio de Sonora, Hermosillo, Mexico. This curriculum has been used in both the clinical and community settings. It has become an important resource for Community Health Workers (CHWs) and other members of the primary health care team at El Rio Community Health Center, especially for chronic disease prevention and management.

Learning Objectives:
1. Become familiarized with a binational, culturally sensitive, evidence-based curriculum that can be used with local communities to prevent chronic disease.
2. Understand models of practice and integration of a clinical and community program to improve prevention of chronic disease.
3. Describe innovative programming that integrates physical, nutritional, and emotional skills into a medical/community program.

Presenters: Lorena Verdugo & Ernie Perez, El Rio Health Center

4 - FIELDS → HOME → CLINIC: RESPONDING TO PESTICIDE EXPOSURES

CEUs: CME, CNE, NASW

Exposure to pesticides can have acute and chronic health effects in adults and children. One manner by which workers and their families may be exposed to pesticides is through the work-to-home exposure pathway, which is the unintended transfer of contaminants from the workplace to households by way of contaminated clothing, equipment, and family vehicles. Given that pesticides are often not visible on surfaces, it is difficult to see how easily this transfer can occur. This session will allow participants to visually observe this transfer through the use of a water-based tracer under UVA light (black light). The session will review the signs and symptoms of pesticide poisonings and discuss resources to assist clinicians, from the physician to the CHW, in recognizing and managing pesticide exposures as well as their role in prevention and reporting of suspected pesticide illnesses. Presenters will discuss recent farmworker poisonings as case studies to review clinician roles and responsibilities.

Learning Objectives:
1. Understand how pesticides can be transported from work to home and who is most vulnerable to pesticide exposure.
2. Be familiar with pesticide poisoning signs and symptoms and the process of reporting poisoning in the workplace and at home.
3. Understand policies, regulations, and resources to prevent worker and at-home exposure.

Presenters: Maria Blancas & Pablo Palmandez, Pacific Northwest Agricultural Safety and Health Center; Anne Katten, California Rural Legal Assistance Foundation; Jillian Hopewell, Migrant Clinicians Network; Virginia Ruiz, Farmworker Justice
5 – NEW FINDINGS FROM THE NATIONAL AGRICULTURAL WORKERS SURVEY AND UPDATES ON COLLABORATIONS WITH HRSA

This session will present national and western stream findings from over 5,000 crop worker interviews conducted between 2015–2016 by the Department of Labor’s National Agricultural Workers Survey (NAWS) in collaboration with HRSA and other federal agencies. The findings cover workers’ demographics, employment characteristics, migration patterns, income and poverty status, access to social services and childcare as well as health insurance status, sources of insurance, health care utilization, and self-reported health history. In addition, presenters will provide an update on new health data collection that began October 1, 2017. The NAWS now asks workers about preventive health care for themselves and their family members using a HRSA-sponsored questionnaire supplement. Finally, presenters will show attendees how to use the updated NAWS website to access new reports and data tables as well as a HRSA-sponsored website that provides customizable charts and graphs on 18 health topics.

Learning Objectives:
1. Use the HRSA-sponsored health findings website to obtain information on agricultural workers’ health.
2. Identify the main demographic factors affecting health care access and utilization among domestic crop workers.
3. Understand the content and timing of the HRSA-sponsored preventive health data collection and some uses of the data it will generate.

Presenters: Susan Gabbard, JBS International; Daniel Carroll, U.S. Department of Labor

6 – ENSURING PATIENT CONFIDENTIALITY WITHIN THE HEALTH CENTER SETTING

Given recent challenges faced by some members of our communities, many patients without legal status have been cancelling their medical appointments and dis-enrolling from programs, like Medi-Cal, for which they are eligible. For decades, Community Health Centers (CHCs) have been safety-net providers for underserved and low income communities, while also serving as active advocates for their patients’ health care rights. To help reassure our patients and minimize the access barriers created by the current political environment, health centers have been looking to implement policies and procedures to safeguard patient confidentiality that will help ensure the safety of all patients, regardless of legal status.

Learning Objectives:
1. Learn protocols on how to appropriately interact with external officials, including designating staff to act as enforcement liaisons.
2. Understand important legal definitions regarding “private spaces” as well as legal protections and avenues for recourse for patients and staff.
3. Attain template policy statements, talking points, strategies on messaging and outreach to patients, stakeholders, and the larger community.

Presenters: Elizabeth Oseguera, California PCA; Janelle Sauz, LifeLong Medical Care; Gabrielle Lessard, National Immigration Law Center
7 – REACH MODEL: COMMUNITY-LED APPROACH FOR HEALTH EQUITY

**CEUs:** CME, CNE, NASW

REACH (Racial and Ethnic Approaches to Community Health) is a CDC-funded program that provides support to underserved and vulnerable populations to develop community-led interventions to address relevant social determinants of health. The REACH model was developed based on the successful strategies utilized by these communities to address health inequities. This session will focus on the REACH model and the role of community-led coalitions and Community Health Workers (CHWs) in the success of these interventions, and how they can be integrated into communities working toward health equity.

**Learning Objectives:**
1. Identify the components of the REACH model.
2. Integrate components of the REACH model into their current projects.
3. Identify how the components of the REACH model can be applied to address social determinants of health.

**Presenters:** Martha Moore Monroy and Ada Wilkinson-Lee, UA; Floribella Redondo, AZCHOW; Charlie Alfero, Southwest Center for Health Innovation; Charmaine Ruddock, The Institute for Family Health; Antoinette Angulo, Creative Narrations

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8 – FORESTRY WORKER SAFETY AND HEALTH IN THE PACIFIC NORTHWEST: COMPARING AND ADDRESSING DIFFERENT PERSPECTIVES ON SAFETY CULTURE AND HAZARDS BETWEEN MANAGEMENT AND WORKERS

**CEUs:** CME, CNE, NASW

Forestry services workers are largely young foreign-born workers from Latin America and are at high-risk for work-related injury and illness. An academic-community partnership project, Sí Sé: Salud y Seguridad en el Trabajo, was launched to address this occupational health disparity. Using a participatory model and a case-study design, this project characterizes working conditions, injury and illness experiences, safety mitigation efforts, employer retaliation, and recovery/return-to-work among forestry services contractors and Latino workers in southwest Oregon. Data collection involved worksite observations, employer and worker surveys, and 99 case-study interviews with workers. Presenters will discuss perceptions of safety culture, highlighting differences between management and workers. Participants in this session will identify potential educational and advocacy solutions to help inform future work by the partnership. Our overarching goal is to facilitate empowerment-building among a community of underserved, highly vulnerable workers and forestry services contractors, and to seek workplace and employment improvements.

**Learning Objectives:**
1. Understand the hazards and concerns faced by forestry services workers.
2. Describe the differences in safety culture and hazard perception between management and workers.

**Presenters:** Arnold de Castro, UW; Marcy Harrington, Pacific Northwest Agricultural Safety and Health Center

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9 - INCREASING ACCESS TO CARE FOR AGRICULTURAL WORKERS: HEALTH INSURANCE AND THE AG WORKER ACCESS 2020 CAMPAIGN

Health centers play an important role to increase access to care for agricultural workers. Health insurance outreach and enrollment efforts ensure workers apply for, understand, and use their health insurance. But health insurance is only an effective tool for health care access if health centers develop and implement comprehensive action plans responsive to the needs of the workers they serve. This workshop will discuss national strategies to promote health care access. Alexis Guild from Farmworker Justice will discuss current policy and national strategies related to health insurance enrollment among agricultural workers. Alicia Gonzales from NCFH will discuss the Ag Worker Access 2020 campaign and will share key strategies that health centers can implement to promote health care access. At the end of the workshop, participants will have tools and resources to develop action plans to effectively identify and promote health insurance enrollment, and increase health center utilization among agricultural workers in your area.

Learning Objectives:
1. Understand the current state of health insurance enrollment among agricultural workers, including relevant policy updates.
2. Learn more about the AgWorker Access 2020 campaign.
3. Develop clear and comprehensive action plans, based on current promising practices.

Presenters: Alicia Gonzales, National Center for Farmworker Health; Alexis Guild, Farmworker Justice

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AGENDA

» January 31, 2018 - Overview of Hypertension and Impact on Public Health and Primary Care
» February 28, 2018 - Overview of Diabetes and Impact on Public Health and Primary Care
» March 28, 2018 - Focus on Prevention: Healthy Eating, Active Living
» April 25, 2018 - Care Coordination: The Role of the Clinician
» June 27, 2018 - Care Coordination: The Role of Enabling Services
» July 25, 2018 - Behavioral Health and Chronic Disease Management
» August 29, 2018 - Patient Engagement and Motivational Interviewing
» September 26, 2018 - Tools to Support Behavior Change in Chronic Disease Management
» November 28, 2018 - Partnering to Promote Health
» December 19, 2018 - Conclusion – Sharing Best Practices of What Works

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10 - THE SILENT CRISIS: ADDRESSING FEAR AND DISCRIMINATION IN AGRICULTURAL WORKER COMMUNITIES

CEUs: CME, CNE, NASW

Recent policy changes and harmful rhetoric have created serious challenges for health centers to reach and provide care to all patients. In response, many patients, including agricultural workers and their families, choose to forego necessary primary and preventive care services, resulting in complications to their physical, mental, and behavioral health. In the summer of 2017, Health Outreach Partners (HOP) and Northwest Regional Primary Care Association (NWRPCA), hosted a series of convenings throughout California, Washington, and Oregon. These events gathered Community Health Workers (CHWs), Promotores(as), and other frontline staff to identify and discuss the challenges they encounter while working to support their communities, brainstorm solutions to these challenges, and exchange best practices. In this session, HOP will review key findings from the convenings, and share recommendations for how to best support all communities in accessing care during such trying times.

Learning Objectives:
1. Identify the challenges that CHWs and other frontline staff encounter while working to support all members of their respective communities.
2. Identify current and potential solutions for effective outreach strategies in the current climate.
3. Identify and share self-care practices that promote the health and well-being of CHWs and other frontline staff in difficult work environments.

Presenters: Edith Hernandez & Kristen Stoimenoff, Health Outreach Partners

11 - STRATEGIES FOR ENGAGING UNDERSERVED COMMUNITIES

CEUs: CME, CNE, NASW

This panel of experts will discuss the unique opportunities and challenges of working with underserved communities, including refugees, Latinos/as, and American Indians/Alaska Natives. Emphasizing the importance of community collaboration, the panel will share strategies to reduce health disparities while building on cultural strengths and resilience of our diverse communities.

Learning Objectives:
1. Understand systemic oppression and how it effects health outcomes.
2. Describe principles for conducting community-engaged public health practice and research.
3. Describe community-based strategies to address health disparities.

Presenters: A.J. McClure, Global to Local; Esther Lucero, Seattle Indian Health Board; India Ornelas, UW Latino Center for Health
12 – EMERGENCY PREPAREDNESS AND RESPONSE FOR VULNERABLE POPULATIONS

**CEUs:** CME, CNE, NASW

After a disaster, vulnerable populations, including women, children, and limited-English proficient populations, often become even more vulnerable and need trusted organizations that can help them navigate resources. This workshop will address the unique needs of vulnerable populations at times of an emergency or disaster. The presenters are experts in their field with a multitude of real life examples on how to plan and respond to the challenges that exist for vulnerable populations after a disaster. This workshop will provide attendees with tools and resources to be better prepared in working with vulnerable populations before, during, and after an emergency.

**Learning Objectives:**
1. Describe components of individual and organizational preparedness.
2. Identify the challenges to consider when planning for vulnerable populations, such as women, children, and limited-English proficient populations.
3. Obtain resources that exist for vulnerable populations after a disaster.

**Presenters:** Jillian Hopewell, Migrant Clinicians Network; Jodie Halsne, American Red Cross; Lewissa Swanson, U.S. Department of Health and Human Services

FRIDAY, FEBRUARY 23

13 – HHS PRIORITY ON MENTAL HEALTH: SUPPORTING MENTAL HEALTH IN VULNERABLE POPULATIONS

**CEUs:** CME, CNE, NASW

Behavioral health and physical health are interrelated and providing behavioral health care in a primary medical care setting can reduce stigma and discrimination, lead to improved patient outcomes, and is cost effective. In addition to programs and services delivered through the Health Center program, Ryan White HIV/AIDS Health Professions training, and Loan Repayment programs, HHS invests in high-priority mental health initiatives to deliver hope and healing to the 43.1 million adults with mental illness. Behavioral health care delivered in primary care settings has become a gateway for many individuals with behavioral health and primary care needs to gain critical access to these essential health care services.

**Learning Objectives:**
1. Identify barriers experienced by victims of intimate partner violence in Latino(a) agricultural worker communities.
2. Describe the benefits of utilizing a community-based, Promotora-led program to address intimate partner violence in Latino(a) agricultural communities.
3. List three culturally appropriate strategies to address intimate partner violence in Latino(a) rural/agricultural worker communities.

**Presenter:** Laura Macia, MHP Salud

14 – USING PROMOTORES(AS) DE SALUD TO ADDRESS INTIMATE PARTNER VIOLENCE IN RURAL COMMUNITIES

**CEUs:** CME, CNE, NASW

Latinos(as) living in rural areas face a disproportionate risk of suffering intimate partner violence. El Arte de Sobrevivir is a community-based, Promotora-led program designed to address this concern serving survivors of sexual assault, domestic violence, dating violence and/or stalking. Participants in this session will learn about the program’s development, approach, and outcomes, and will walk away with strategies and free resources to implement similar programs in their communities.

**Learning Objectives:**
1. Identify how behavioral health conditions, including depression and anxiety, impact diverse populations across the lifespan.
2. Describe how exposure to adverse childhood experiences, complex trauma, and toxic stress impact health across the lifespan.
3. Leverage health information that supports the expansion of behavioral health services integration into primary care.

**Moderator:** Aphrodyi Antoine, HRSA Office of Regional Operations, Region 10

**Presenters:** Christopher Blodgett, WSU Child and Family Research Unit; Lesley Steinman, UW Health Promotion Research Center; Bethany Applebaum, HRSA Office of Women’s Health
15 - PROFILE OF COMMUNITY HEALTH WORKERS (CHWS)

The American Public Health Association defines a CHW as a “frontline public health worker who is a trusted member of and/or has an unusually close understanding of the community served. This trusting relationship enables the worker to serve as a liaison/link/intermediary between health/social services and the community to facilitate access to services and improve the quality and cultural competence of service delivery.” Community Health Centers (CHCs) have long incorporated CHWs in their practices and, indeed, the CHC mission suggests that CHWs can be of special benefit as CHCs seek to strengthen their capacities to improve clinical outcomes and advance population health objectives while addressing social determinants and advancing health equity. Presenters will report on the findings of two recent studies of how CHWs are being incorporated in public health and health care systems in the Northwest. Using the study findings as a launch point, presenters will discuss how CHWs might be deployed to strengthen patient-centered and community-based care in future.

Learning Objectives:
1. Explain the frameworks and core definitions for CHWs.
2. Describe the range of CHW roles and functions, and core competencies necessary for CHWs to be effective.
3. Identify ways in which CHWs can be utilized to advance community and patient-centered models of care.

Presenters: Maria Blancas, UW; Seth Doyle, NWRPCA

16 - MIGRATORY POPULATIONS: WHO ARE THEY? ARE THEY HEALTHY?

CEUs: CME, CNE, NASW

Nowadays migration and migratory populations have become a “hot topic.” But how much do we know about migratory populations in the world and in the U.S.? Are all migratory populations the same? Why do they migrate? Are they healthier or unhealthier than the rest of the population? What are the main health issues that affect migratory populations? These and many other related topics will be explained and discussed during this informative and interactive workshop.

Learning Objectives:
1. Describe the main different types of migratory populations.
2. Understand migratory populations’ determinants of health.
3. Understand the health disparities and the diversity of health issues that exist among different migratory groups in the U.S.

Presenter: Liliana Osorio, UC Berkeley School of Public Health, Health Initiative of the Americas

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17 – INTEGRATING CHWS TO ADDRESS MENTAL HEALTH ISSUES AMONG CHILDREN AND FAMILIES SERVED BY COMMUNITY HEALTH (CHCS)

CEUs: CME, CNE, NASW

In this workshop, presenters will review the results of a provider survey conducted by Children’s Partnership and the California Primary Care Association (CPCA) to collect data on the mental health of foreign-born children and their parents. The discussion will explore policy and issue recommendations to better support these families as well as discuss the important role that Promotores(as) and CHWs play in helping to address anxiety experienced by patients impacted by recent policy changes. CPCA will also provide an overview of the work it is doing to increase the utilization of Promotoras and CHWs in clinics and the influence these workers can have in addressing the stigma around mental health care. Finally, Community Health Center Network will provide an overview of their Promotor program, including data collected on the effectiveness of utilizing CHWs to help address barriers to mental health care for culturally diverse populations.

Learning Objectives:
1. Identify key success factors for CHW program sustainability and recognize the important role CHWs play in helping to address concerns from diverse patients.
2. Acquire knowledge on how children in California have been impacted by recent policies, specifically through health care enrollment and utilization data.
3. Identify at least two resources to support families that are available from partner organizations or the internet.

Presenters: Elizabeth Oseguera, California PCA, Aracely Navarro, Children’s Partnership; Angela O’Brien, Community Health Center Network

18 – UNDERSTANDING BARRIERS FACED BY INDIGENOUS MEXICAN AND GUATEMALAN WOMEN TO ACCESS PRENATAL CARE IN SKAGIT AND WHATCOM COUNTIES

CEUs: CME, CNE, NASW

Many local indigenous female migratory and seasonal agricultural workers (MSAW) in Northwest Washington tend to access prenatal care late in their pregnancy. Evidence demonstrates that getting early and regular prenatal care improves the chances of a healthy pregnancy and birth. There is limited understanding of the reasons for the indigenous female MSAWs’ delayed access to prenatal care. Sea Mar’s Promotores(as) program has undertaken a pilot study to identify prenatal care knowledge, attitudes and perceptions which might account for this deleterious practice among local indigenous women from Southern Mexico and Guatemala. Findings will enable better understanding of factors that affect access to prenatal care. The study was conducted in collaboration with the Community Health Worker Coalition for Migrants and Refugees (CHWCMR), and funded by the UW Latino Center for Health.

Learning Objectives:
1. Identify structural and non-structural barriers to prenatal care access and uptake among indigenous women.
2. Compare prenatal care practices between the three indigenous communities.
3. Assess ways in which cultural differences between the three indigenous communities impact their adoption of prenatal care.

Presenters: Colleen Pacheco, Sea Mar CHC
**19 – CHWs: Current Workforce Trends and Developments**

Community Health Workers (CHWs) have made important contributions to communities and health and social service systems for decades. Although interest in the CHW workforce has grown in recent years, further progress is impeded by fragmented policy development efforts, persistent lack of stakeholder understanding of CHWs, and lack of a unified voice for the workforce itself. This session will highlight key trends and innovations taking place at the local, state, and national levels. Presenters will describe workforce development, professional association, and coalition building efforts, including the national Community Health Worker Core Consensus (C3) Project recommendations, the development of a statewide apprenticeship program in Alaska, and examples of how Community Health Centers (CHCs) in Idaho are helping to shape core competency training.

**Learning Objectives:**
1. Discuss applications of the national C3 Project recommendations in stakeholder education and state policy development.
2. Understand how health care apprenticeship works and its application to the CHW workforce.
3. Discuss the importance of CHW networks or professional associations at the state and national levels, and identify strategies for collaboration with local CHW networks.

**Presenters:** Carl Rush, Community Resources; Cherise Fowler, Alaska PCA; Laura Macia, MHP Salud; Luis Lagos, Family Residency of Idaho

**20 – Creating Culturally Competent Services to Improve Health for Migratory Populations**

The session will be a combination of an oral presentation, small group discussion, and full group discussion. The oral presentation will introduce participants to the topic of cultural competency and share specific examples of strategies to foster access and utilization of health system services for migratory populations. The small group discussions will allow participants to discuss their respective health systems and the unique characteristics of the migratory populations served through those systems. In the full group discussion, participants will broaden their knowledge of cultural competency by sharing examples of proven practices currently in place in different health centers. Attendees will also explore new cultural competency strategies to foster access, utilization, and social inclusion of migratory populations.

**Learning Objectives:**
1. Define cultural competency, understand the scope the topic, and articulate the objectives of specific cultural competency strategies.
2. Describe the importance of embedding cultural competency practices in a health care system serving migratory populations.
3. Articulate improvement strategies to enhance equity and social inclusion through the use of cultural competency strategies.

**Presenter:** Jessica Joanne Currier, OHSU, PSU School of Public Health
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21 – SUPPORTING CHWS, THE FIRST RESPONDERS TO COMMUNITY CRISIS

CEUs: CME, CNE, NASW

As residents of the communities they serve, Community Health Workers (CHWs) are well-suited to develop connections with patients that foster safety and trust. But for most CHWs, being “allowed in” to their patients’ private lives can also mean having to bear witness to a degree of pain and suffering that they feel unequipped to handle. Without careful training and support, these situations can leave CHWs feeling stressed, powerless, and confused. To maximize their effectiveness, it is necessary to develop appropriate evidence-based ways of training and supporting CHWs so they may successfully carry out their work. This workshop will discuss findings from a series of focus groups with CHWs on this subject. Our goal is to utilize these as a stepping stone to constructing solutions with CHWs and the organizations that employ them.

Learning Objectives:
1. Report findings from a mental health training needs study of CHWs and challenges faced when working with targeted communities.
2. Present creative and culturally relevant strategies utilized by CHWs that can be developed, encouraged, and supported by their supervisors and collaborators.
3. Explore the creation of a support network for CHWs and offer recommendations for the development of professional development and emotional support.

Presenters: Martha Lucia Garcia, Marist College; Elizur Bello & Lorena Sprager, The Next Door

22 – HHS PRIORITY ON CHILDHOOD OBESITY: STRATEGIES AND BEST PRACTICES IN PROMOTING HEALTHY WEIGHT

Obesity-related health problems put incredible strain on individuals, families, and the nation’s health care systems. According to the Centers for Disease Control and Prevention, people who are obese have medical costs that are $1,429 higher than those of normal weight, while other studies estimate that the annual cost of being obese is $4,879 for women and $2,646 for men. That’s why fighting and reducing childhood obesity is one of three clinical priorities at the Department of Health and Human Services. Programs administered through the Maternal and Child Health Bureau, HRSA-supported health centers, and rural health outreach are on the frontlines of combating this crisis.

Learning Objectives:
1. Increase awareness of community-centered approaches to reduce childhood obesity.
2. Gain a better understanding of policies, programs, and strategies to address food insecurity.
3. Identify best practices in promoting active lifestyles and highlight community-centered approaches.

Moderator: Gabriele Colangelo, HRSA Office of Regional Operations, Region 10

Presenters: Brie Davis, YMCA of Greater Seattle; Carrie Glover, Childhood Obesity Prevention Coalition; Eli Mancillas, MHP Salud; Carolyn Gleason, HRSA, Maternal Child Health Bureau
23 - LESSONS FROM THE FIELD: SUCCESSES AND CHALLENGES OF INTEGRATING CHWS AT PRIMARY CARE CLINICS

**CEUs:** CME, CNE, NASW

Beginning in September 2016, the WA State Department of Health began supporting six clinics across the state of Washington to hire and integrate a CHW as part of the CHW Integration Pilot project. Each clinic designed their own pilot project with technical assistance from the Foundation for Healthy Generations (Healthy Gen). This session will showcase the diverse CHW program models designed by each clinic and highlight common successes and challenges that clinics faced while designing and rolling out their projects. A panel of CHWs and supervisors will share their perspectives, experiences, and advice for successful CHW integration. The discussion will cover defining the CHW’s role and key roles played by CHW supervisors to support successful integration, and collecting data to show success and identify opportunities for quality improvement.

**Learning Objectives:**
1. List three essential steps to successfully integrate CHWs into clinical settings.
2. Describe the diverse roles of CHWs working in clinical settings.
3. Identify at least one practical solution for successful CHW integration.

**Presenters:** Andrew Taylor & Sarah Salomon, Foundation for Healthy Generations

24 - STRATEGIES TO ENHANCE HEALTH DATA COLLECTION AT COMMUNITY HEALTH CENTERS IN A "SUPER-DIVERSE" SOCIETY

The U.S. is becoming a more culturally and linguistically diverse society. In response to these ongoing societal changes, Community Health Centers (CHCs) have been encouraged to collect key data elements from patients (e.g. detailed race and ethnicity, primary language, and English proficiency) and provide access to adequate interpretation services in order optimize communication and ensure accurate information is obtained from every patient. This panel will identify opportunities to enhance data collection activities by CHCs, including through the current Uniform Data System (UDS) structure and modernization efforts, as well as community health needs assessments.

**Learning Objectives:**
1. Describe patient data collection practices by CHCs.
2. Assess the limitations in patient collection of diversity data elements and language access practices during data collection.
3. List three best practices to enhance data collection practices by CHCs.

**Presenter:** Alfonso Rodriguez-Lainz, Centers for Disease Control and Prevention; Sylvia Partida, National Center for Farmworker Health

25 - STRENGTHENING THE PROMOTOR THROUGH SELF-CARE

*This session will be presented in Spanish. English interpretation available.

**CEUs:** CME, CNE, NASW

This workshop will present a model of holistic self-care for Promotores(as), and discuss the importance of balancing emotional and physical health in the personal, family and community domains. The Visión y Compromiso “Circulo de Bailoterapia” program will be presented as a peer-support model for community integration to improve self-care among community residents.

**Learning Objectives:**
1. Assess levels of wellness in eight major areas to highlight the need for emotional and physical balance and self-care.
2. Discuss ability to incorporate new daily self-care techniques to improve emotional wellness and physical activity in their life.
3. Describe the process for improving a community’s levels of physical and emotional wellness through the involvement of community residents into a “Circulo de Bailoterapia” peer-support program.

**Presenters:** Gerry Balcazar & Arizbe Garcia, Visión y Compromiso
26 - SUPPORTING THE HEALTH AND WELL-BEING OF WOMEN

CEUs: CME, CNE, NASW

Women migratory workers often lack access to reliable, unbiased, and practical health tools in their language to help them promote and organize for better health. Hesperian Health Guides works with community-based groups to develop culturally appropriate, actionable health information in multiple languages. Hesperian developed Health Actions for Women, a practical resource with activities, stories, and tools to help address the social and structural barriers affecting the health of women and girls. Derived from the experiences of women and communities across the globe, Health Actions addresses the cultural, social, and economic barriers to good health. This session will introduce participants to the resource and engage in discussion to identify strategies for speaking about sensitive topics, including violence, gender, and sexuality.

Learning Objectives:
1. Understand the need for practical and actionable women’s health information to promote the well-being of women migratory workers.
2. Identify strategies to discuss sensitive topics such as violence, gender, and sexuality in migratory communities.
3. Apply elements of the discussion to improving the cultural and linguistic content of women’s health messages received in the community.

Presenter: Kokaale Amissah-Aidoo, Hesperian Health Guides

27 – RETURN ON INVESTMENT OF A COMMUNITY HEALTH WORKER PROGRAM FOR SUPER-UTILIZER MEDICAID MEMBERS IN A NEVADA MANAGED CARE ORGANIZATION

Previous studies have shown positive return on investment (ROI) for Community Health Worker (CHW) programs in a variety of programs and populations. However, no such studies have been conducted in Nevada. The purpose of this study was to determine the financial impact of embedding CHWs within a managed care organization. Health care utilization and medical and prescription cost data were collected for 1,437 members of a managed care organization who were super-utilizers (three or more emergency room visits in six months) for 90 days prior to and 90 days after enrollment in the CHW program. A positive ROI was found, indicating that for every $1 spent on the program, $1.81 was saved in medical and prescription costs. Additionally, reductions were found from pre- to post-intervention in the number of acute admissions and re-admissions, emergency room visits, and urgent care visits. The positive results of this ROI should encourage other organizations to embed CHWs within their organizations in order to improve health outcomes and reduce medical costs.

Learning Objectives:
1. Explain the financial impacts of embedding CHWs in a managed care organization.
2. Understand how to calculate return on investment.
3. Design a return on investment study for a CHW program.

Presenters: Elizabeth Christiansen, UN Reno; Masako Horino, Nevada Division of Public and Behavioral Health

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28 – COMMUNITY COLLABORATION IN HEALTH AND MIGRATION RESEARCH

**CEUs:** CME, CNE, NASW

Collaborative research with migratory agricultural worker communities produces tangible products that have personal meaning and use for the communities as social, political, and cultural capital. Involvement of community members at all levels of research—design, implementation, field research, data analysis, results production, and dissemination—generates tools that can be used to raise awareness of the diversity, economic impact, and cultural contributions of migratory agricultural workers to local society. These collaborative projects can provoke positive change in local communities regarding housing, health care, labor practices, and policy. This session will outline methodologies for collaborative research with migratory agricultural worker communities. Presenters will share appropriate and tangible products that demonstrate the potential of collaborative research to involve communities in the perception and treatment of migratory agricultural worker communities by the larger societies in which they reside.

**Learning Objectives:**
1. Approach local migrant farmworker communities to engage in collaborative research.
2. Conceptualize an appropriate collaborative research project to present to local migrant and farmworker communities.
3. Visualize tangible and meaningful research products that serve the needs of both researchers and community partners.

**Presenters:** Bonnie Bade & Noemi Jara, CSU San Marcos

SATURDAY, FEBRUARY 24

29 – INNOVATIVE STRATEGIES FOR ADDRESSING HEPATITIS C IN WASHINGTON STATE

**CEUs:** CME, CNE, NASW

Hepatitis C virus (HCV) infection causes significant morbidity and mortality, and places considerable burden on the health system. Historically, limited resources have restricted the scope of HCV surveillance and intervention activities in Washington. In response, the Washington State Department of Health developed and released its HCV epidemiologic profile entitled “Viral Hepatitis C in Washington State.” Various strategies were used in dissemination of the profile, but the major emphasis was on direct, in-person presentation/discussion sessions with providers and health systems across Washington. Barriers and opportunities to strengthen health system response to HCV were captured through the dissemination plan, which facilitated the creation of provider tools and resources for HCV prevention and treatment.

**Learning Objectives:**
1. Identify key components of chronic hepatitis surveillance in Washington State.
2. Review Hepatitis C policy as it relates to Medicaid treatment coverage in Washington State.
3. Identify provider resources and technical assistance for strengthening Hepatitis C screening and linkage to care activities within a primary care setting.

**Presenters:** Jon Stockton & Nicole Dronen, WA State Department of Health
Cure, also known as sustained virologic response (SVR), is defined as no detectable HCV in the blood at least 12 weeks after completion of therapy.1,2


Visit HCVcanbecured.com to register to receive the HCV toolkit.
30 – EXPANDING THE REACH OF CARE: UTILIZING HEALTH EDUCATION FOR DIABETES PREVENTION AND CONTROL

**CEUs:** CME, CNE, NASW

Although a national health concern, diabetes disproportionately affects the migratory seasonal agricultural worker (MSAW) population. Health centers have long utilized health education as a viable intervention method; however, this service is only effective when it reaches the broader MSAW population, particularly those not regularly accessing care. During this workshop, Health Outreach Partners (HOP) and MHP Salud will make the case for utilizing outreach workers and Community Health Workers (CHWs)/Promotores(as) de Salud to conduct diabetes health education with MSAWs. Through interactive group discussions and activities, participants will learn about the PRECEDE-PROCEED and Stages of Behavior Change models, and identify specific outreach activities to support MSAWs with diabetes prevention and control.

**Learning Objectives:**
1. Describe how outreach programs can effectively connect migrant seasonal agricultural workers to health center services for diabetes prevention and control.
2. Explain the PRECEDE-PROCEED and the Stages of Behavior Change models and how to apply them to health education.
3. Identify at least two strategies for delivering effective health education on diabetes prevention and management in outreach settings.

**Presenters:** Edith Hernandez, Health Outreach Partners; Laura Macia, MHP Salud

31 – RESOURCES FOR CHWS: USING SOCIAL MEDIA TO EXPAND COMMUNICATION

CHWs are a vital link to the patients they serve and to the community. An integral part of the health care team, CHWs are on the front lines of health communication. In this session, participants will learn how CHWs can use social media to reach patients and further their health communication efforts. The session includes a “how to” component on getting started in social media with group discussion, case studies, and suggested techniques to use in managing social media.

**Learning Objectives:**
1. Know how social media can serve as a health communication channel.
2. Use social media for professional development.
3. Address the challenges and opportunities of using social media for health communication.

**Presenter:** Patricia Devine, National Library of Medicine, UW

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32 - FIGURE DRAWING TO SUPPORT ORAL HEALTH EDUCATION FOR COMMUNITY HEALTH WORKERS (CHWS)

Since its development in 1926, figure drawing has been used extensively with children. It is easy to administer with instruction, does not require a strict format, is relevantly culture free, and easy to use with people with limited English proficiency. Community Health Workers for Migrants and Refugees (CHWCMR) will instruct participants in how to incorporate a figure drawing activity into training for lay leaders and report on the preliminary findings from this approach in Washington. Currently, CHWCMR is involved in an innovative project that uses figure drawing to introduce participants to oral health and social determinants of health and begins to identify how participants’ feelings about their own health may be connected to cultural, social, and structural determinants impacting self-esteem.

Learning Objectives:
1. Learn how to use a figure drawing activity to introduce a health topic and social determinants of health.
2. Correlate figure drawing with the interest of participants in their own health and healthy behaviors (prevention).
3. Identify negative and positive emotions relating to participants’ health.

Presenters: Allen Cheadle, Kaiser Permanente Research Institute; Gino Aisenberg, UW

33 - HHS PRIORITY ON OPIOIDS: STRATEGIES TO ADDRESS OPIOID MISUSE AND ABUSE

Lack of access to treatment for opiate abuse is a growing problem nationwide. To combat the opioid epidemic sweeping across our land, HRSA provides funding to approximately 300 Community Health Centers (CHCs) to expand services for those with substance use disorders. These services focus on the treatment, prevention, and awareness of opioid abuse in the primary care setting by increasing personnel, leveraging health information technology, and providing training. HHS has made
addressing the opioid abuse problem a high priority and is committed to accelerating its work towards two broad goals: 1) decreasing opioid overdoses and overall overdose mortality and 2) decreasing the prevalence of opioid use disorder.

**Learning Objectives:**
1. Increase understanding of the opioid epidemic through better public health surveillance.
2. Identify support for prevention, treatment, and recovery.
3. Name the data elements important for measuring success in improving management of chronic opioid therapy.

**Moderator:** Aphrodyi Antoine, HRSA Office of Regional Operations, Region 10

**Presenters:** Laura-Mae Baldwin, UW; Yvonne Elmendorf, Consejo Counseling and Referral Service

### 34 – IMPROVING PATIENT SATISFACTION AND EXPERIENCE THROUGH THE INTEGRATION OF CULTURAL COMPETENCY AND COMMUNICATION SKILLS

**CEUs:** CME, CNE, NASW

Our experiences, whether good or bad, form lasting impressions and memories. As CHCs, our goal is to provide patients the best experience possible so they become patients for life. During this session participants will gain new skills and understand how to integrate cultural competency, communication skills, and customer service into practice at all levels of health care service delivery through videos, discussion, and interactive group exercises.

**Learning Objectives:**
1. Explain the concepts of cultural competency and the skills needed to create positive patient experiences.
2. Build optimal internal and external interpersonal communications skills.
3. Increase knowledge and understanding of excellent customer service skills.

**Presenters:** Alicia Gonzales, National Center for Farmworker Health

### 35 – DIGITAL STORYTELLING: A TOOL TO PROMOTE HEALTH EQUITY

This session focuses on how communities can successfully use digital stories in their projects and advocacy efforts to promote health equity. Digital stories are one of the tools that ensure community voices shape the development of interventions and advocacy efforts to address health disparities.

**Learning Objectives:**
1. List at least three of the multiple roles digital stories can play in health equity work.
2. Discuss how digital stories can be used in community assessments.
3. Discuss how digital stories can be used to train providers in culturally and linguistically appropriate care.

**Presenters:** Martha Moore Monroy & Ada Wilkinson-Lee, UA; Antoinette Angulo, Creative Narrations; Floribella Redondo, AZCHOW; Patty Molina, Mariposa Community Health Center
DentistLink.org, a free online tool operated by Arcora Foundation, increases access to care by connecting patients to dentists who accept their type of insurance (Apple Health/Medicaid, self-pay or commercially insured) and are located near where the patient lives or works. The tool was piloted with Unify Community Health and other partners in Spokane, WA, and is now available statewide in both English and Spanish. Referral partner organizations, including hospital emergency departments, systematically refer patients to FQHCs, nonprofit clinics, and private practice dentists. Community Health Workers (CHWs) connect patients to care through DentistLink.org and provide patient education in advance of the appointment to address barriers to care such as dental fears or transportation. The session will include a case study of the Unify Community Health pilot and a hands-on activity to experience the DentistLink.org tool in real time.

Learning Objectives:
1. Discuss opportunities to fill health center dental appointments using DentistLink.org.
2. Design a program that includes CHWs to connect patients to care, increase show-up rates and support care coordination.
3. Demonstrate the DentistLink.org tool to health center colleagues and patients.

Presenters: Karen Davis & Laura Flores Cantrell, Arcora Foundation; Jessica Pearson, Unify Community Health

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**AGENDA**

- January 10, 2018 - The Seamless Team (register and receive the recording of this webinar!)
- February 14, 2018 - Motivational Interviewing and Beyond (register and receive the recording of this webinar!)
- March 14, 2018 - Criminalization of Behavioral Health in the Age of Mass Incarceration
- April 11, 2018 - Detecting Social Determinants of Health in a Treatment Environment
- June 13, 2018 - Expanding the Team Beyond the Four Walls
- July 11, 2018 - Prevention Program: Opioids and Addiction
- August 8, 2018 - Intervention Program: Opioids and Addiction
- September 12, 2018 - Harm Reduction Approach: Opioids and Addiction
- November 14, 2018 - How to Impact Physical Care - Team Response: Opioids and Addiction
- December 12, 2018 - Conclusion: Sharing of Best Practices

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