



***Community Health Aide Project (CHAP)
Learning Collaborative: Indian County ECHO
Session: Community Health Aide Provider
(CHAP) Tribal Needs and Readiness
Assessment***

INDIAN + COUNTRY
ECHO
LEADING THE WAY 

*Growing the Ability to Deliver Quality Healthcare to
American Indian and Alaska Native People.*





NORTHWEST PORTLAND AREA INDIAN HEALTH BOARD

Indian Leadership for Indian Health

Established in 1972, the Northwest Portland Area Indian Health Board (NPAIHB or the Board) is a non-profit tribal advisory organization serving the forty-three federally recognized tribes of Oregon, Washington, and Idaho. Each member tribe appoints a Delegate via tribal resolution and meets quarterly to direct and oversee all activities of NPAIHB.

What WE Do:

NPAIHB Delegates create and update a strategic plan, which contains four main functional areas:

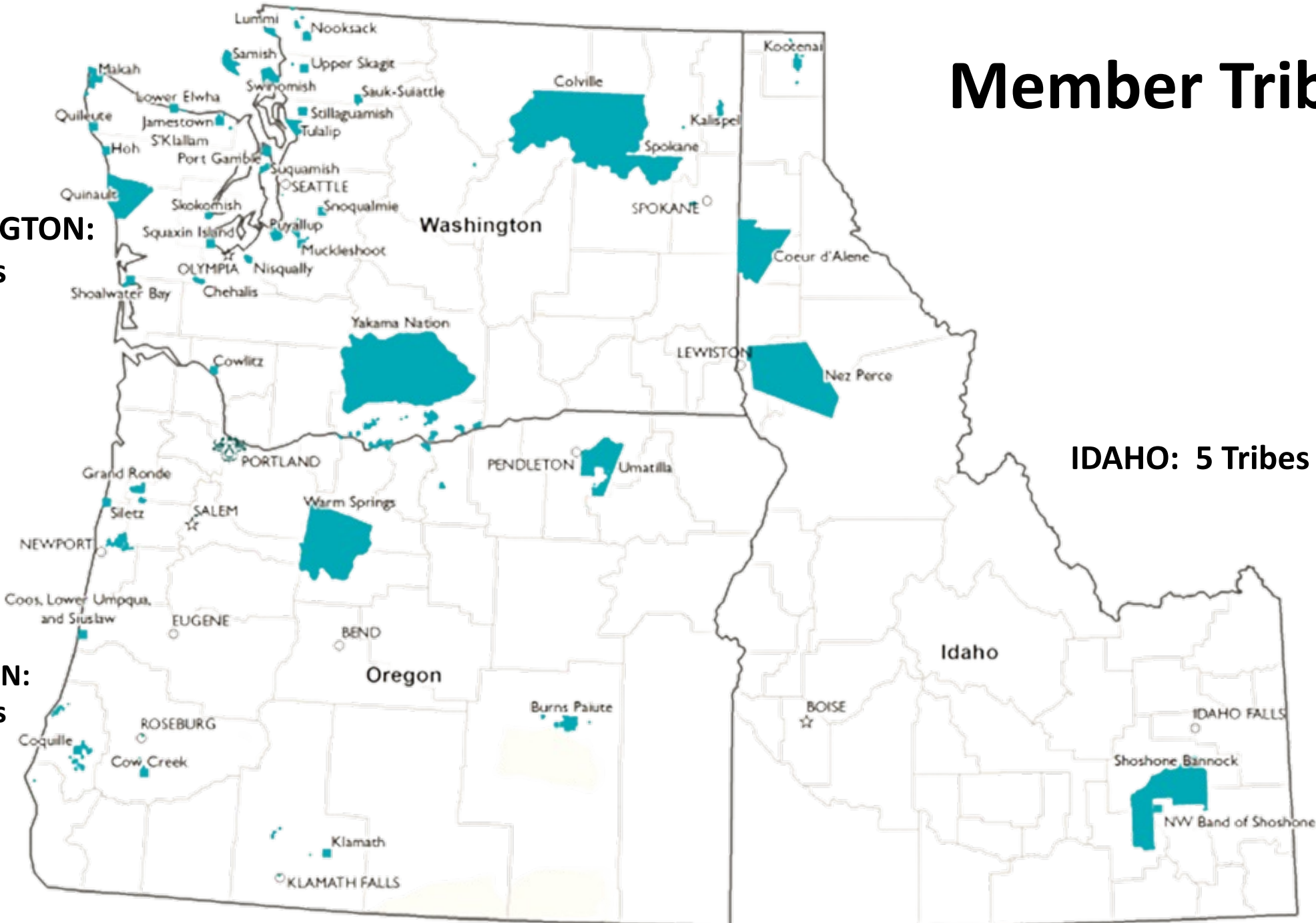
- Health promotion and disease prevention
- Legislative and policy analysis
- Training and technical assistance
- Surveillance and research

NPAIHB houses a tribal epidemiology center (EpiCenter), several health promotion disease prevention projects, and is active in Indian health policy.



Member Tribes

**WASHINGTON:
29 Tribes**



**OREGON:
9 Tribes**

IDAHO: 5 Tribes

NORTHWEST CHAP:

Tribal Community Health Provider Program (TCHPP)

ESTABLISHED IN 2015



Dental Health
Aide/Therapist
(DHA/T)



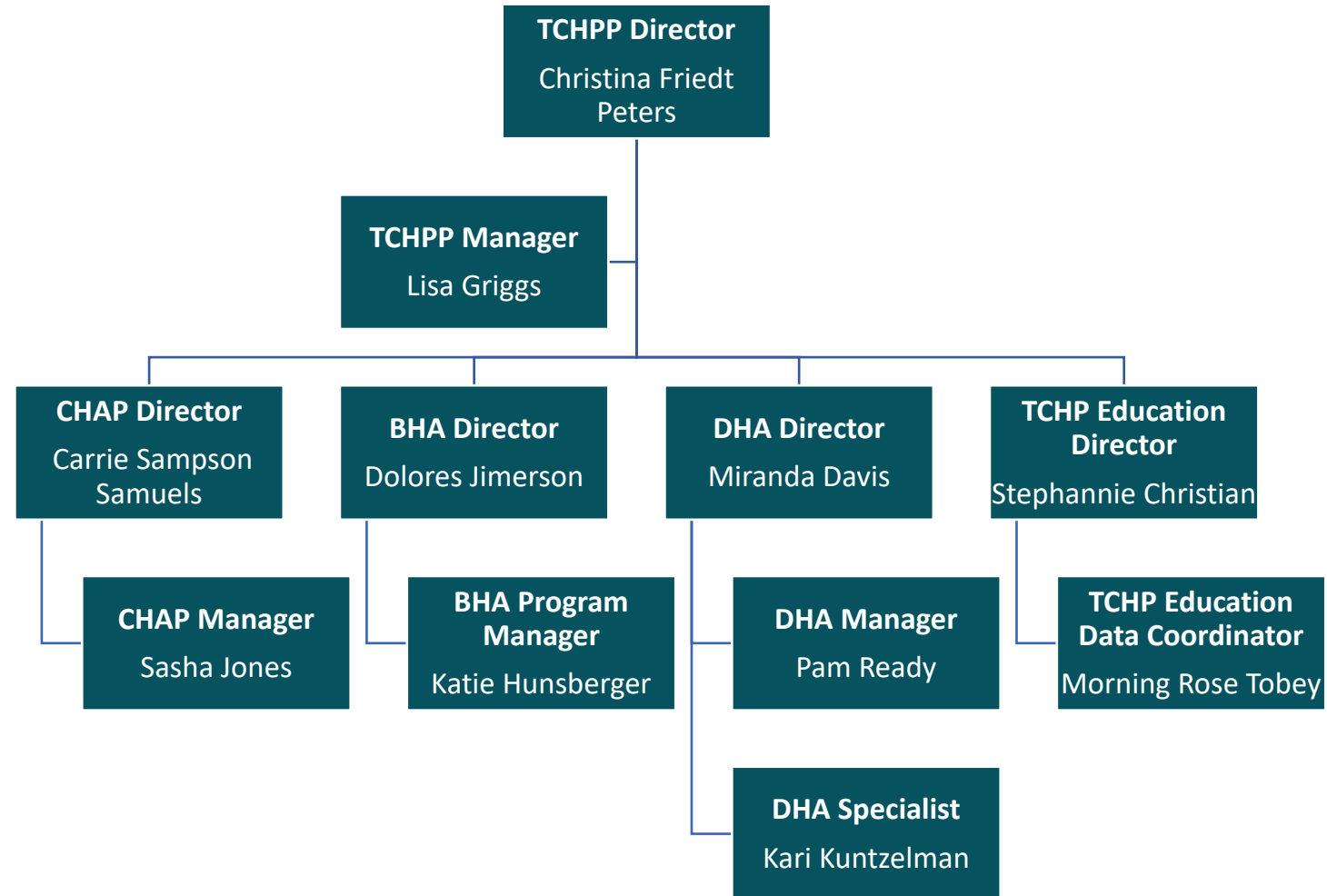
Behavioral Health
Aide/Practitioner
(BHA/P)



Community Health
Aide/Practitioner
(CHA/P)



Tribal Community Health Provider Program Team



Subject Matter Experts



Behavioral Health

Jenece Howe
BHA III

Dolores Jimerson, Clinical
Supervisor

Dr. Danica Brown,
Behavioral Health
Director/Expert

Dr. Jeff King, Clinical
Supervisor



Community Health

Rebecca Pazdernick,
Physician Associate

Danni Dearing, MD/MPH
Candidate

Linda Curda, Nurse
Midwife

Jim Ferguson, Physician
Associate

Kathy Pickering, PA



CHAP Certification Board

Tanya Firemoon,
PACCB Lead

Torie Heart, CHAP CB
Expert

Ellie Barber, PACCB
Specialist



Dental Health

Jeremy Horst, DDS
Kathleen Tomlin,
DDS

Suzanne Eberling,
DDS

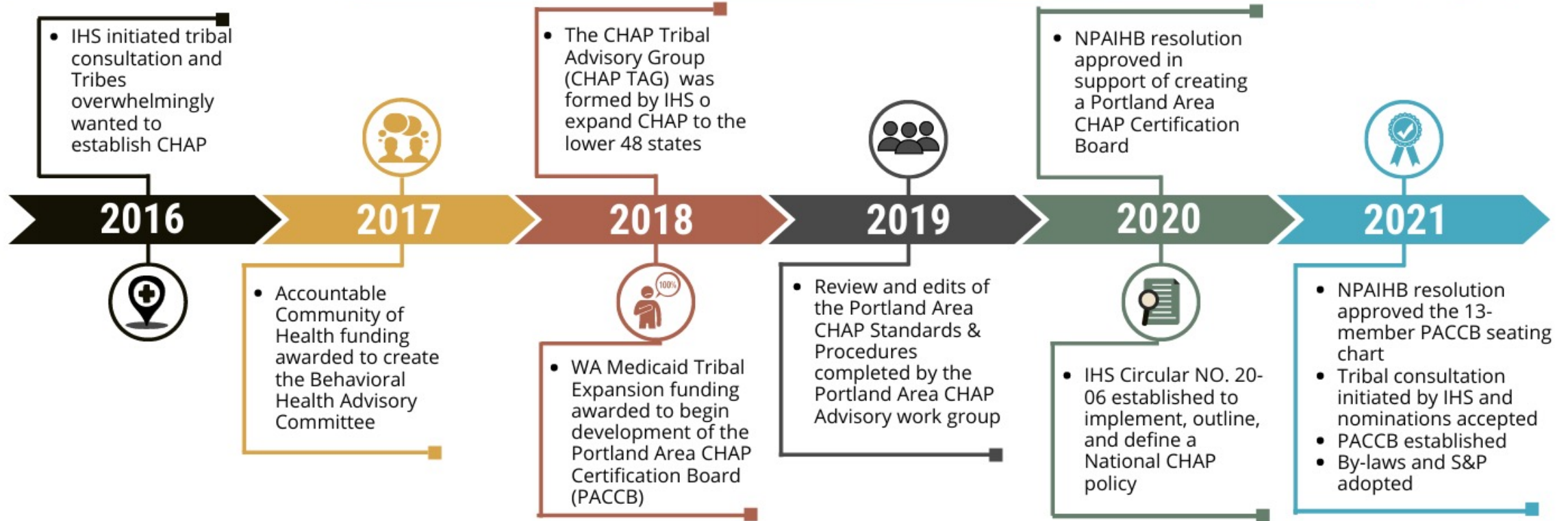
Dane Lenaker, DMD
MPAH

Marybeth Kinney,
RDH

Tom Taylor, DDS,
Rachel Hogan, DDS
Mary Williard, DDS

Northwest Portland Area Indian Health Board

Portland Area CHAP Certification Board Overview



PACCB Mission and Vision



PACCB Mission Statement:

- To support the overarching goals of the Portland Area Community Health Aide Program by addressing social determinants of health while improving access to high quality, integrated healthcare.

PACCB Vision:

- To identify, dismantle, and disrupt structural and systemic inequities, elevate tribal traditions and values, and support tribal health systems with culturally responsive standards, policies, and procedures.

The Board's primary goals will be to promote and improve the following:

- 1) Certification application review and recommendation of Tribal Community Health Providers (TCHP).
- 2) Certification of all Tribal education and training programs.
- 3) Approve all continuing education (CE).
- 4) Address health inequities within the Tribal Health System (THS) by reviewing and recommending individuals, education programs and continuing education and ensure they maintain Portland Area certification standards. The PACCB will create opportunities to increase CHAP providers within the THS to increase access to quality care.

Background of Portland Area CHAP Certification Board (PACCB)



- **Mar 2018** – NPAIHB CHAP Advisory Committee formed to create a committee focused on tribal input for CHAP infrastructure including the certification board, standards and procedures, and more
- **Jan 2021** – NPAIHB Resolution # 21-03-10: Supports the finalization of the recommended PACCB member seating chart recommended by the NPAIHB CHAP Board Advisory Workgroup
- **April 2021** – PAIHS Area Office completed tribal consultation on the PACCB seating and Portland Area CHAP Implementation Plan
- **April 2021** – inaugural members of the PACCB appointed by Area Director Seyler
- **PACCB launched August of 2021:**
 - Sue Steward, Chair, Dr. Maxine Janis, Vice Chair, and Kelle Little, Secretary
 - PASP, Bylaws, BHA/DHA Application forms adopted November of 2021.
- **2nd term of officers elected:**
 - Kelle Little, Chair, Dr. Maxine Janis, Vice Chair, and Sue Steward, Secretary – effective October 1, 2023.
- **March 2022** – Dental Academic Review Committee first meeting
- **April 2022** – Behavioral Health Academic Review Committee first meeting
- **February 2023:** Alaska’s DHAT/BHA training curriculum was presented by PA DARC/BHARC, confirming that each program meets the PASP minimum requirements. The goal of each recommendation is for students who successfully complete Alaska’s education programs to become eligible for PACCB certification.

Background of Portland Area CHAP Certification Board (PACCB)



- **April 2023** – I.H.S. Director formally recognizes PACCB
 - Portland Area IHS Director reappoints all members of inaugural PACCB
- **May 2023:** Calibration – Federal certification exercise (based off Portland Area Standards and Procedures)
- **June 2023:** Federal Certification Exercise (based off Portland Area Standards and Procedures)
- **August 2023:** Recommended one BHA/P and DHAT for Alaska CHAPCB federal certification. NW DHAT/BHA training curriculum was presented by PA DARC/BHARC confirming that each program meets the PASP minimum requirements. The goal of each recommended is for students who successfully complete NW education programs to become eligible for PACCB certification.
- **October 2023:** First CHARC meeting

Future opportunities to strengthen Board-to-Board relationships include:

- Inform administrative staff/officers about upcoming ACB/ARC meetings.
- Include each other on the agenda for Area updates

Recent PACCB Activities:

- The implementation of CHAP for our Northwest tribes is supported by committed students, providers seeking certification, tribal advisory members, clinical staff, TCHPP staff, SMEs, Board members, and ARC committee members

CHAP DISCIPLINES

DENTAL HEALTH AIDE /THERAPIST (DHA/T)

DHA/Ts are highly-trained primary oral health care providers that have a narrow scope of practice, focusing on routine and preventive services which include simple extractions and restorations. DHAs focus on outreach and prevention and work with advanced providers to provide restorative care.



BEHAVIORAL HEALTH AIDE/PRACTITIONER (BHA/P)

BHAs are counselor's, health educators, and advocates. BHAs help address individual and community-based health needs such as alcohol, drug and tobacco abuse and mental health. BHAs use a combination of Western and traditional-based practices to provide care.



COMMUNITY HEALTH AIDE/PRACTITIONER (CHA/P)

CHA/Ps are certified primary and emergency care clinicians who have close cultural ties and connections to the communities they serve. They work within the tribal health and human systems and practice under the supervision of a licensed clinical provider.



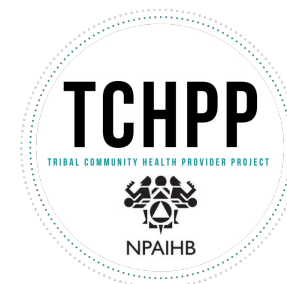


Dental Health Aide CHAP Analysis Data

Dental Health Aide Program

Tribal Community Health Provider Program

Northwest Portland Area Indian Health Board



Purpose

To receive feedback from tribal dental programs in order to tailor the NW DHAP to our tribal communities, ensuring we are addressing the priority areas and needs of our dental programs and our communities



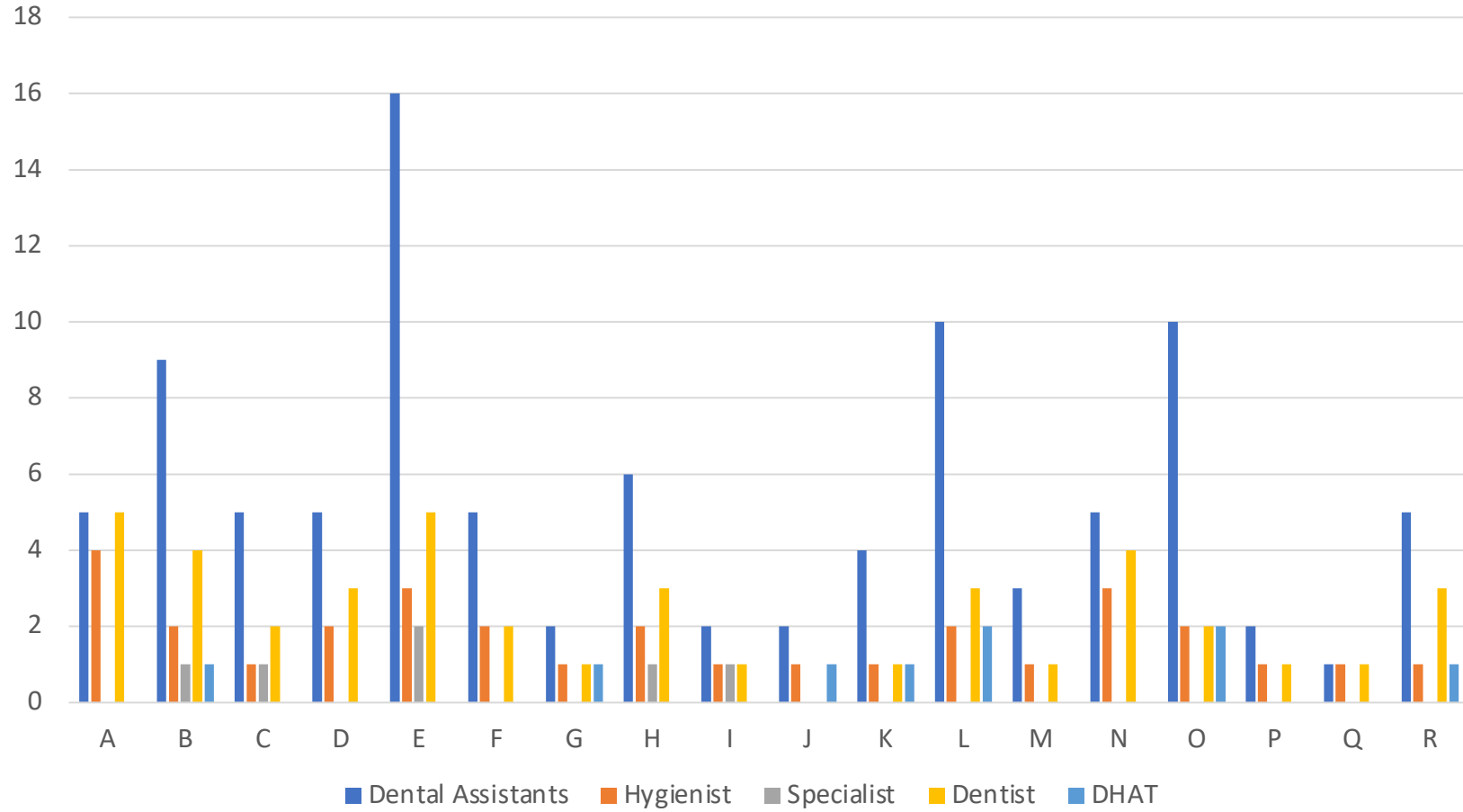
Response rate

CHAP analysis was done via phone call, email or zoom meeting

- 19/30=63% clinics responded
- 16 were completed by dental directors
- 2 were completed by Dental Health Aide Therapists
- 1 was completed by an assistant dental director



Number of each provider type by clinic



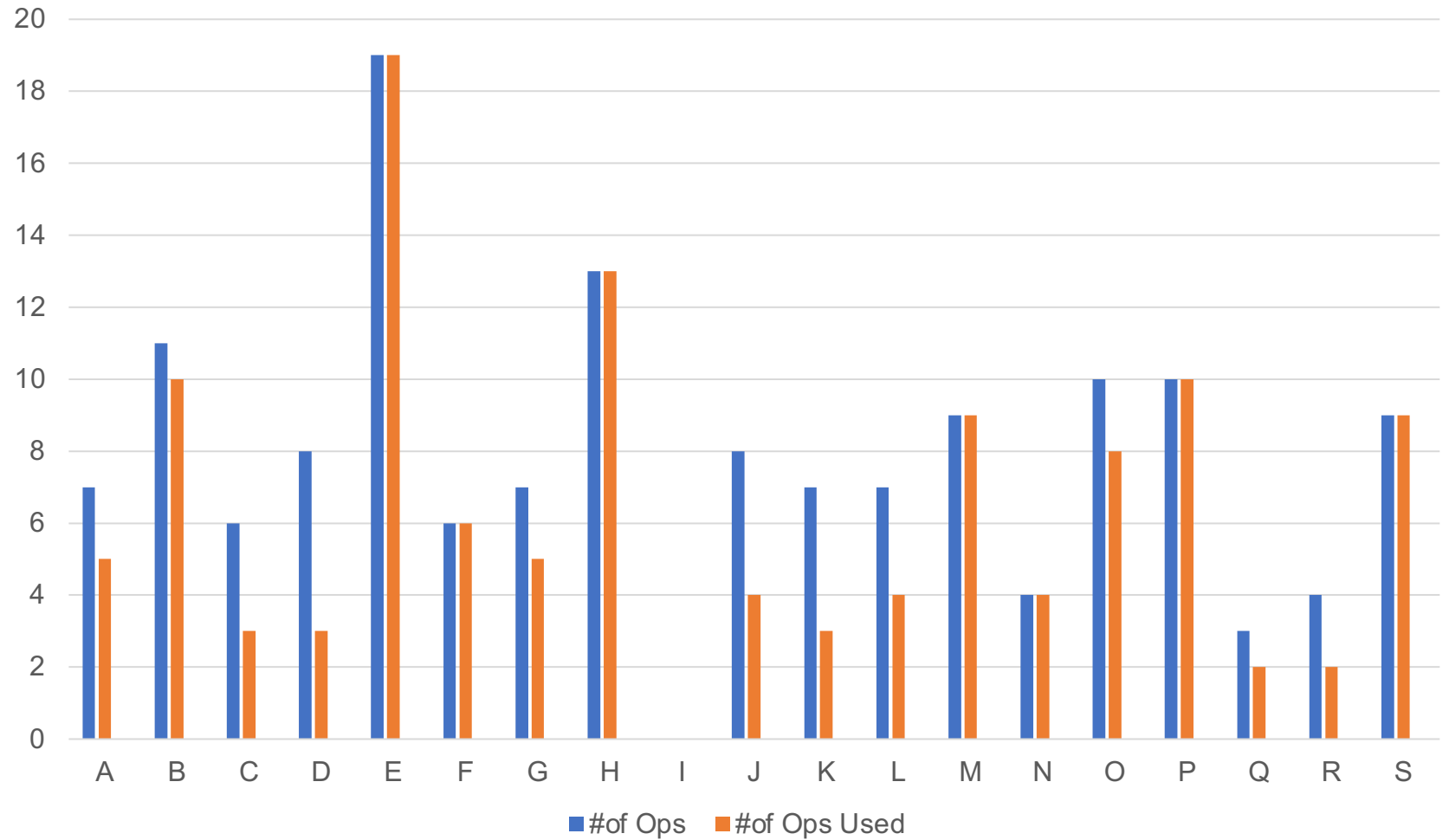
Recruitment/Retention a Challenge

- 16/19= 84% of clinics reported having staff recruitment or retention rate a challenge
- Reasons:
 - Staff shortage
 - Location of their clinic being rural
 - Vaccination requirements
 - Lack of flexibility in reference to work/life balance



10/18=55% of clinics are not able to utilize their clinic space due to lack of staffing

Number of operatories and utilization





Clinics with Active Outreach Programs

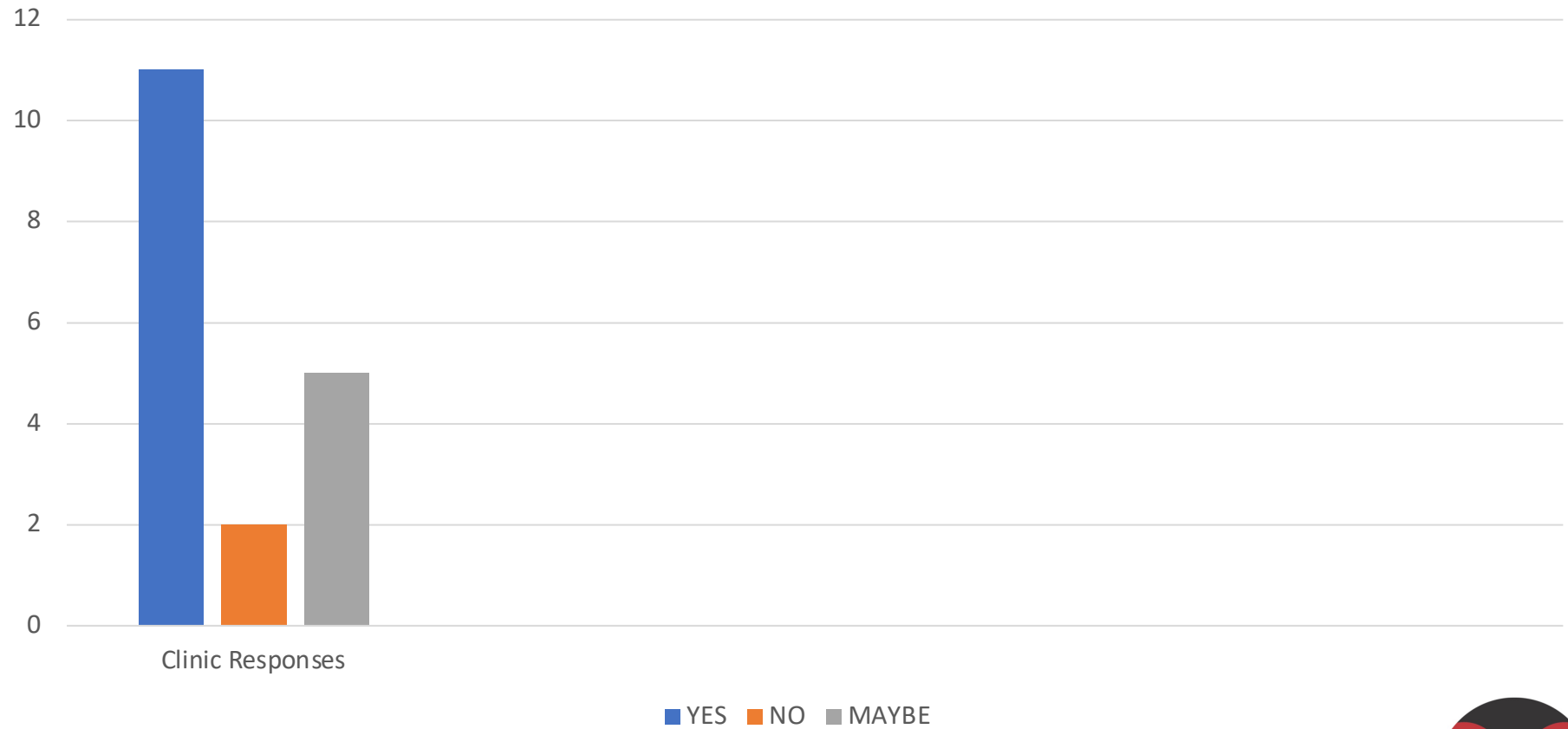
- 8/19= 42% of the participating dental clinics currently have an outreach program
- All clinics stated they are interested in providing outreach but do not have capacity



11/18 clinics
stated an interest
in becoming a
training site



Interest in Becoming a Training Site



Biggest Need of the Clinic

- 13/19=69% responded their clinic's biggest need is more staff



Why is this data important?

- Clinics' biggest need is staff
 - The DHA Program trains providers from their own community to return to their community and work
 - DHAP has many levels of providers include a PDHA II which can be trained in dental assisting skills and coronal prophylaxis skills
- Recruitment/Retention Difficult
 - The Dental Health Aide Program helps tribal communities grow their own providers
 - Training members of a tribal community using culturally relevant curriculum has the potential for sustainability for those providers - they are less likely to leave that community if that community is there home
- Clinics lack the capacity to provide outreach
 - Outreach has been shown to help increase access to oral health care
 - All levels of Dental Health Aides are trained to focus heavily on oral health promotion and disease prevention
 - DHAs can partner with providers in existing outreach programs or develop an outreach program if one does not exist
 - Allows for the hygienist or DHAT to remain in clinic if needed



The Dental Health Aide Program

DHAs are prevention focused and can provide many procedures under general supervision supporting outreach programs

- Improves efficiency in the current dental clinic setting
 - Reducing patient wait times
 - Improving access to care
- Increases continuity of care by
 - Retainment of providers
- Creates quality, sustainable careers for tribal members
 - Reducing barriers to education
 - Training community members in their own communities



When asked “what is your biggest need,
and your clinics biggest need?”

“Someone that can place SDF and
sealants”-~Dental Director





Health Provider Shortage Areas (HPSA): Dental





Health Provider Shortage Areas

Health Provider Shortage Areas (HPSAs) are regional designations that indicate practitioner shortages in dental health, behavioral health, and primary care

- HPSAs can receive a score between 0-26



Dental HPSA for AI/AN Populations in Oregon 2021- 2022

County	Region or Clinic	Designation Type	HPSA Score
Coos	Coquille Community Health Center	IHS, Tribal Health and Urban Indian Health	19
Coos	Coos Tribal Health Center – Dental	IHS, Tribal Health and Urban Indian Health	19
Harney	Wadatika Indian Health Center	IHS, Tribal Health and Urban Indian Health	9
Jefferson	Warm Springs Community Counseling Center	IHS, Tribal Health and Urban Indian Health	22
Klamath	Klamath Tribal Health & Family Services	IHS, Tribal Health and Urban Indian Health	22
Lincoln	Siletz Community Health Clinic	IHS, Tribal Health and Urban Indian Health	20
Marion	Chemawa Indian Health Center	IHS, Tribal Health and Urban Indian Health	20
Multnomah	NARA of the Northwest -Dental	IHS, Tribal Health and Urban Indian Health	19
Polk	Grand Ronde Health & Wellness Center	IHS, Tribal Health and Urban Indian Health	20
Umatilla	Yellowhawk Tribal Health Center	IHS, Tribal Health and Urban Indian Health	20



Dental HPSA for AI/AN Populations in Washington 2021-2022

County	Region or Clinic	Designation Type	HPSA Score
Clallam	Jamestown S’Klallam Family Health Center	IHS, Tribal Health and Urban Indian Health	22
Clallam	Sophie Trettevick Indian Health Center	IHS, Tribal Health and Urban Indian Health	13
Clallam	Quileute Health Clinic	IHS, Tribal Health and Urban Indian Health	14
Clallam	Lower Elwha Klallam Medical Clinic	IHS, Tribal Health and Urban Indian Health	20
Cowlitz	Cowlitz Tribal Health Clinic	IHS, Tribal Health and Urban Indian Health	15
Douglas	San Poil Valley Community Health Center	IHS, Tribal Health and Urban Indian Health	20
Douglas	Inchelium Community Health Center	IHS, Tribal Health and Urban Indian Health	22
Gray	Roger Saux Health Center	IHS, Tribal Health and Urban Indian Health	16
Gray	Squaxin Island Treatment Ctr	IHS, Tribal Health and Urban Indian Health	9
Jefferson	Queets Health Station	IHS, Tribal Health and Urban Indian Health	13
Jefferson	Hoh River CHR	IHS, Tribal Health and Urban Indian Health	15
Jefferson	Muckleshoot Tribal Clinic	IHS, Tribal Health and Urban Indian Health	19
Jefferson	Snoqualmie Tribal Family Clinic	IHS, Tribal Health and Urban Indian Health	18
Jefferson	Seattle Indian Health Board	IHS, Tribal Health and Urban Indian Health	15
Jefferson	Muckleshoot Dental Clinic	IHS, Tribal Health and Urban Indian Health	14
Kitsap	Port Gamble S’Klallam Tribe Health Facility	IHS, Tribal Health and Urban Indian Health	18
Kitsap	Suquamish Tribes Wellness Program	IHS, Tribal Health and Urban Indian Health	18



Dental HPSA for AI/AN Populations in Washington 2021-2022

County	Region or Clinic	Designation Type	HPSA Score
Kitsap	Port Gamble S'Klallam Tribe Health Facility	IHS, Tribal Health and Urban Indian Health	18
Kitsap	Suquamish Tribes Wellness Program	IHS, Tribal Health and Urban Indian Health	18
Mason	Skokomish Tribe	IHS, Tribal Health and Urban Indian Health	17
Mason	Sally Selvidge Clinic	IHS, Tribal Health and Urban Indian Health	9
Okanogan	Omak Health Center	IHS, Tribal Health and Urban Indian Health	20
Okanogan	Colville Indian Health Center	IHS, Tribal Health and Urban Indian Health	20
Pacific	Shoalwater Bay Wellness Center	IHS, Tribal Health and Urban Indian Health	20
Pend Oreille	Camas Center for Community Wellness	IHS, Tribal Health and Urban Indian Health	16
Pend Oreille	The People Place	IHS, Tribal Health and Urban Indian Health	16
Pierce	Takopid Indian Health Center	IHS, Tribal Health and Urban Indian Health	19
Skagit	Sauk-Suiattle Tribal Community Clinic	IHS, Tribal Health and Urban Indian Health	12
Skagit	Swinomish Tribal Health Center	IHS, Tribal Health and Urban Indian Health	13
Skagit	Upper Skagit Tribal Clinic	IHS, Tribal Health and Urban Indian Health	10
Snohomish	Stillaguamish Health Center	IHS, Tribal Health and Urban Indian Health	13
Snohomish	Tulalip Health Center	IHS, Tribal Health and Urban Indian Health	16
Spokane	The Native Project	IHS, Tribal Health and Urban Indian Health	22



Dental HPSA for AI/AN Populations in Washington 2021-2022

County	Region or Clinic	Designation Type	HPSA Score
Stevens	David C. Wyncoop Memorial Clinic	IHS, Tribal Health and Urban Indian Health	20
Thurston	Nisqually Health Clinic	IHS, Tribal Health and Urban Indian Health	14
Whatcom	Lummi Tribal Health Center	IHS, Tribal Health and Urban Indian Health	20
Whatcom	Nooksack Community Clinic	IHS, Tribal Health and Urban Indian Health	20
Yakima	Wapato Health Station	IHS, Tribal Health and Urban Indian Health	21
Yakima	White Swan Dental Clinic	IHS, Tribal Health and Urban Indian Health	22
Yakima	Yakima Indian Health Clinic	IHS, Tribal Health and Urban Indian Health	20



Dental HPSA for AI/AN Populations in Idaho 2021- 2022

County	Region or Clinic	Designation Type	HPSA Score
Benewah	Benewah Medical Center	IHS, Tribal Health and Urban Indian Health	24
Bingham	Shoshone-Bannock Tribes of the Fort Hall Reservation of Idaho	FQHC	25
Bingham	Fort Hall HRSA After Hours Clinic	IHS, Tribal Health and Urban Indian Health	19
Bingham	Not Tsoo Gah Nee Indian Health Center	IHS, Tribal Health and Urban Indian Health	20
Bingham	Kootenai Health Station	IHS, Tribal Health and Urban Indian Health	12
Lewis	Kamiah Health Center	IHS, Tribal Health and Urban Indian Health	22
Nez Perce	Nimiipuu Health Center	IHS, Tribal Health and Urban Indian Health	18





Portland Area Academic Review Committee (DARC)

- Established 3/2022
- Four Dentists, two dental therapists, two dental hygienists
- Established bylaws, mission, purpose
- Develop forms -
 - Certification of curricula package, application form and supporting documentation (applicant checklist, DARC reviewers checklist, CE log, preceptorship form)

Portland Area Dental Health Aide Advisory Workgroup

- Established 3.2023
- Community members and professionals dedicated to the development of the Portland Area Dental Health Aide
- Members provide guidance, oversight and expertise on how to best align the DHA program to fit the needs of NW Tribes.
- Next meeting(virtual): Tuesday, February 13, 2024





CHAP Infrastructure Development: Behavioral Health Aide Considerations

Dolores Jimerson, LCSW (Seneca)
Behavioral Health Education Director

Katie Hunsberger, MPP (Yavapai)
Behavioral Health Aide Program Manager

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CHAP Infrastructure Development

Pre-Operational

Stakeholders and Communities served



1. Awareness & Consent

- Outreach to tribal organizations/communities, supervising clinicians, and prospective health aide patients is necessary to promote awareness about the health aide program.
- Outside of Alaska, awareness and consent among these stakeholder groups for health aide services is not implied and requires active engagement.



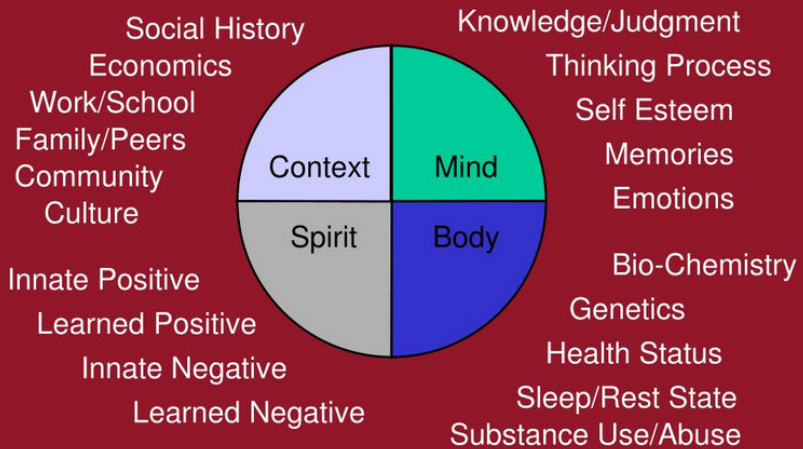
ALASKA NATIVE
TRIBAL HEALTH
CONSORTIUM

Relational Approach and Indigenous Students



Relational Worldview

Individual and Family Level



Partnerships with Academic Institutions

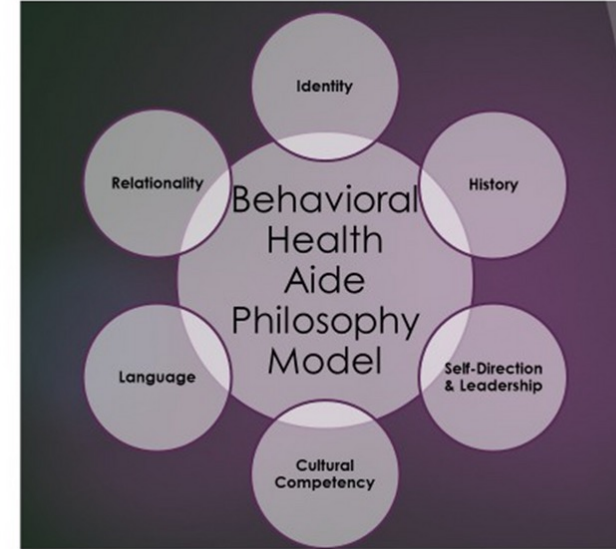


Vision and Mission

- Dreamwork
- Partnerships to Friendships (trust building)
- Indigenous methodologies embedded in program structure

Relational Approach

- Approach to curriculum
 - Collaboration
 - Sessions for S&Ps
 - Certification
- Student experiences



Teaching Model

The Behavioral Health Aide Associates in Technical Arts brings sustainable health practices to indigenous people with emphasis on trauma informed clinical diagnosis as well as creating cultural pathway for positive cultural reorientation to reinforce connection to family, community, and cultural norms.

Stay Connected

- Stayed in contact with clinic staff and tribal leaders.
 - BHA Advisory Workgroup
 - Behavioral Health Academic Review Committee (BHARC)
- Invited partners to come to Alaska with us so they could see CHAP and talk to our ‘relatives.’
- Ongoing, meaningful involvement – stakeholders gave of their time to participate in meetings, advisory groups shared their subject matter expertise, provided input we developed the CHAP standards & procedures.



BHA

Be Ready to Pivot



- Elections can result in change of leadership and a whole new group to orient.
- Public health crises like floods, COVID.
- Understand the behavioral health climate of the community.
 - For instance, in Oregon, we have traditional health workers (THWs are providers with lived experience) who take a weeklong training – they asked why would they want to go to school when they are already doing what some levels of BHA do.



Community Health Aide Program (CHAP)

INDIAN + COUNTRY

ECHO

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*Growing the Ability to Deliver Quality Healthcare to
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Community Health Aide Project Assessment and Implementation



Establish CHA/P Advisory Workgroup

Recruitment for members to serve on Workgroup to meet monthly to discuss timelines and key steps for implementation of the CHA/P.

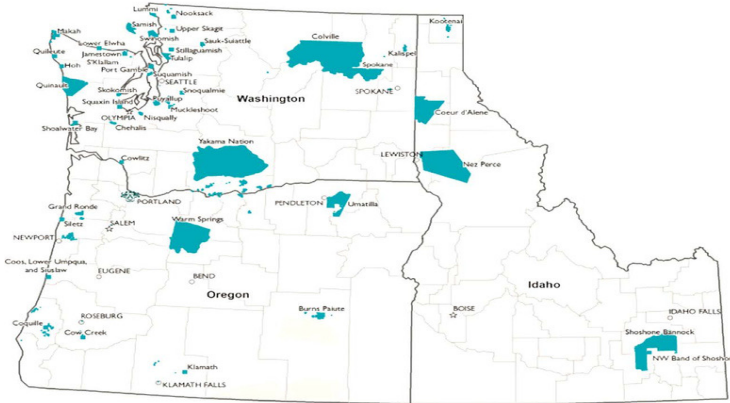
Complete CHA/P Readiness Assessment and Feasibility Study

Feasibility study for CHA/P will be completed to understand the practicality of the new health aide discipline.

This process may identify inadequacies of medical or community health access for AI/ANs.

Northwest Tribal Needs Assessment

Purpose



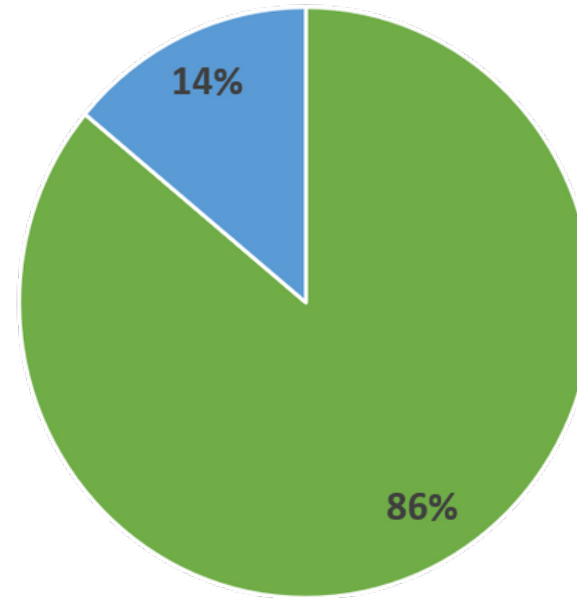
- Current health care services offered in the Northwest tribal health systems.
- Is there a need for Community Health Aide Practitioners in the Northwest tribes.
- What are the current gaps in health care services.
- Identify tribal health organizations who have the capacity and interest in implementation.
- What do tribes know about CHA/P.



- 86% of NW tribes have completed the needs survey.
- 88% of the NW tribes offer general family practice services.
- The user population ranges from 400 to 9,000.
- Most routine visits are 30 minutes.
- Most tribal health organizations serve beneficiaries only.
- Opportunity to build relationships with hospitals.
- Tribes rely on county emergency medical services.

43 Northwest Tribes

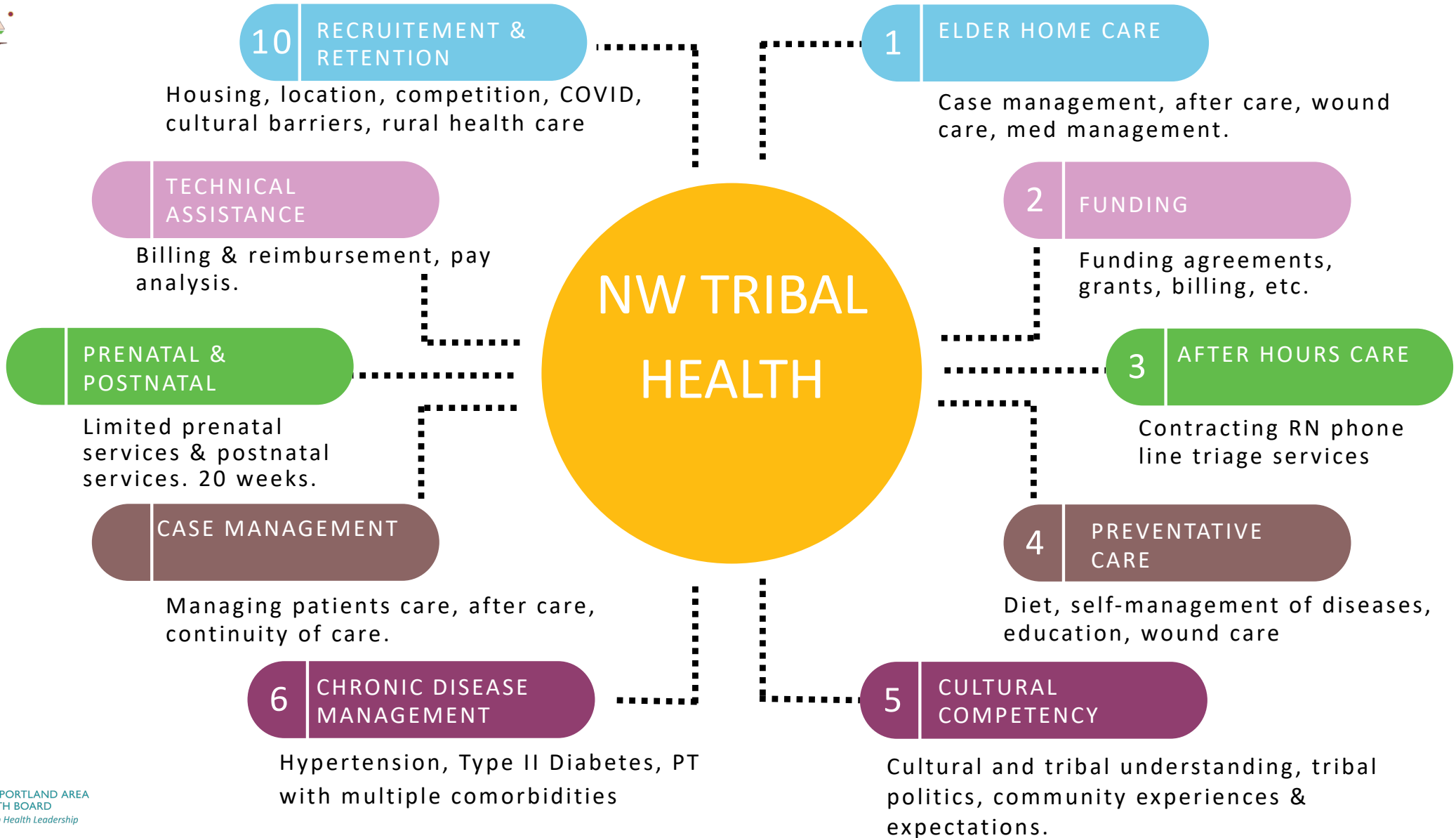
■ Surveyed ■ Not Surveyed





NORTHWEST TRIBAL HEALTH NEEDS

MARCH 2022 - CURRENT



Recruiting Opportunity

For more information please contact:

Stephanie Christian,
schristian@npaihb.org

MorningRose Louie,
mlouie@npaihb.org

Idaho State University

COMMUNITY HEALTH REPRESENTATIVE EDUCATION PROGRAM

WHAT IS A CHR?

The Community Health Representative (CHR) Program is a unique concept for providing health care, health promotion, and disease prevention services. CHRs have demonstrated how they assist and connect with the community, and their work has become essential to the spectrum of Tribal community-oriented primary health care services. CHRs are great advocates, in part, because they come from the communities they serve and have tribal cultural competence. Their dedicated work has assisted many to meet their healthcare needs. The health promotion and disease prevention efforts that CHRs provide have also helped people from the community improve and maintain their health. By providing health education and reducing hospital readmissions, CHRs have contributed to lowering mortality rates. The demand for CHRs continues to grow.

NOW RECRUITING FOR JANUARY 2024 COHORT!

- Northwest Portland Area Indian Health Board is offering CHR training through Idaho State University!
- Core course training offers culturally specific curriculum designed for Indigenous students. Recruiting anyone interested in becoming a CHR or taking on a medical entry level position!
- Students taking only the Core Course will be eligible for around \$1,000. Students who continue onto Advanced Course will receive an additional \$3,000.
- Northwest students will receive priority enrollment.

BENEFITS

- Career Advancement Opportunity**
Keeping indigenous talent in your communities and Tribal Health Organization rather than having them be drawn out of the community.
- Increased Educational Opportunity**
Advance your knowledge as a CHR and use this opportunity to step into becoming apart of any discipline in the Community Health Aid Program!
- CHR Educational Pathway**
CHR is a great place to recruit for Community Health Aides/Behavioral Health Aides/Dental Health Aides. CHR Program supports entire health system.

COMMUNITY HEALTH REPRESENTATIVE PROGRAM
Powered by NPAIHB

AT A GLANCE THE COURSE

Start date 01/11/24

- Online at your own pace
- 12 hrs online class sessions + 36 hrs of homework = 48 hrs total
- 8 live zoom sessions -Thursdays 3pm-4:30pm PST
- Course will be completed over 8 weeks

MORNINGROSE LOUIE
TCHP Education Data Coordinator
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STEPHANIE CHRISTIAN
TCHP Education Director
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APPLICATION CUT OFF 1/4/2024

THIS PROGRAM/EDUCATION PROGRAM IS SUPPORTED BY THE HEALTH RESOURCES AND SERVICE ADMINISTRATION OFFICE OF THE U.S. DEPARTMENT OF HEALTH AND HUMAN SERVICES (HHS) AS PART OF AN AWARD ISSUED IN ACCORDANCE WITH THE PROVISIONS OF THE FEDERAL ACQUISITION REGULATORY GUIDE (FAR) AND THE FEDERAL ACQUISITION REGULATION (FAR) PART 27.101-11. THE GOVERNMENT ASSUMES NO LIABILITY FOR THE ACCURACY OR COMPLETION OF THE INFORMATION PROVIDED BY THE APPLICANT.

Next CHAP ECHO



February 13, 2023

9:00 am PST

Topic: Operational (Health Aides & Program Support)/Recruitment
Successful recruitment of health aides by tribes, tribal organizations, and IHS is the critical first step in the development of CHAP infrastructure with the goal to recruit and retain health aide candidates who will serve in tribal communities. Health aide candidates must meet eligibility criteria according to their discipline.

Tribal Community Health Provider Project Contacts



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