

Development of the NW Community Health Aide Program (CHAP)

Emergency Medicine with Rural and Indigenous Communities Gathering
April 18, 2024

Northwest Portland Area Indian Health Board
Tribal Community Health Provider Program



NORTHWEST PORTLAND AREA
INDIAN HEALTH BOARD



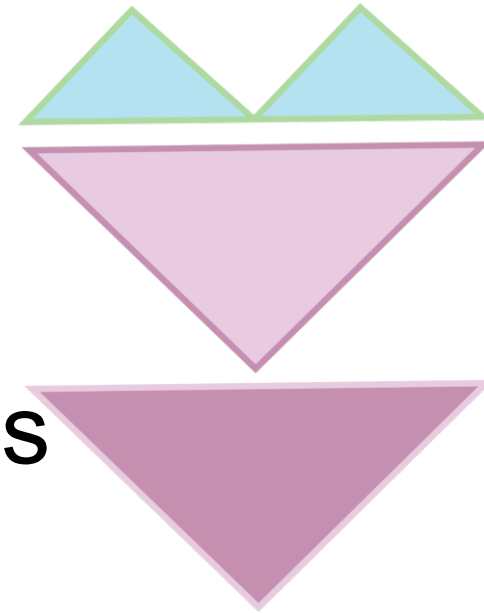
Presenter

Carrie Sampson Samuels

About Presenter:

Carrie Sampson-Samuels is an enrolled member of the Confederated Tribes of the Umatilla Indian Reservation located in Eastern Oregon. Carrie has an early background in nursing providing patient care in long term and clinical care settings. Carrie then furthered her education in community health and health studies at Portland State University, later advancing her education in healthcare management at Oregon Health and Sciences University while serving in leadership and executive management for a Tribal health organization as the Community Health Director. Carrie has served Tribes from Oregon to Montana and the Treaty 7 Nations in Southern Alberta.

As the Community Health Aide Project Director for the Northwest Portland Area Indian Health Board, Carrie has provided leadership, advocacy and project management for expansion of the Community Health Aide/Practitioner role for NW Tribes.





Presenter

Jason Butler

About Presenter:

Jason Arion Butler is an enrolled member of the Ute Tribe of Fort Duchesne, Utah and is also part Mojave and Cherokee. He resides in Gibson, Idaho with his wife of 22 years, children, and grandchild who are all enrolled members of the Shoshone-Bannock Tribes. He graduated from Idaho State University with a Bachelor of Arts in Psychology and earned his Master of Science in Family and Human Development from Arizona State University. He has spent the past 5+ years employed by the Shoshone-Bannock Tribes, Tribal Health and Human Services Department, where he spent time serving as the Recovery Service Coordinator for the Four Directions Treatment Center, the manager for the Community Health Representative program, and recently accepted the position of Behavioral Health Manager. He strives to incorporate Native culture, traditions, morals, and values into the healthcare services provided to Native communities, implementing these practices into his work with the Shoshone-Bannock Tribes and advocating for the reconstruction of healthcare practices nationally. Today he says, "I am loving life and am extremely thankful to have found a career path I love".

Objectives

- ▶▶ Community Health Aide/Practitioner (CHA/P) History
- ▶▶ CHA/P development in the Pacific Northwest Tribes (ID, OR, WA)
- ▶▶ Yellowhawk CHA/P Pilot Site Implementation
- ▶▶ CHA/P Training and Curriculum
- ▶▶ CHA/P Infrastructure
- ▶▶ Behavioral Health Aide Program
- ▶▶ Dental Health Aide Program

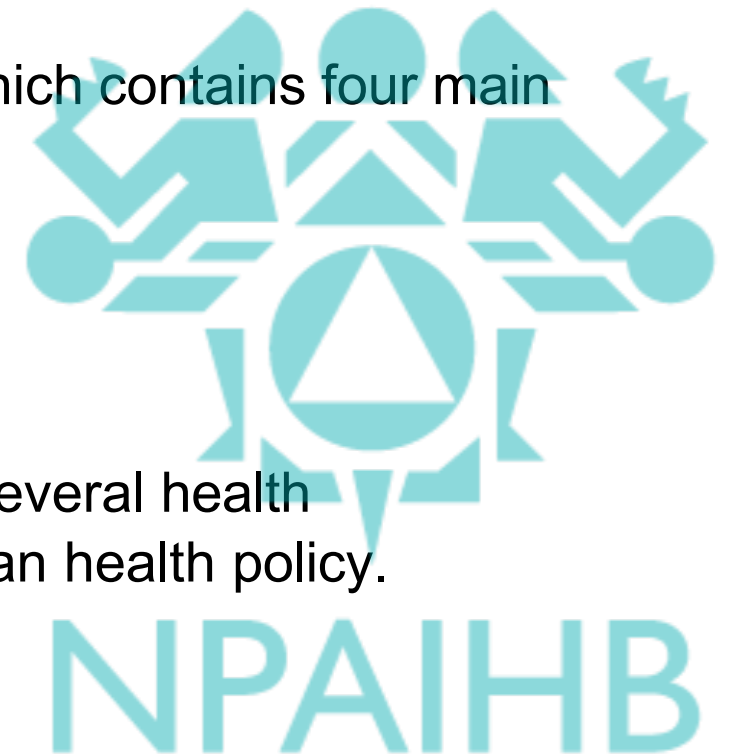


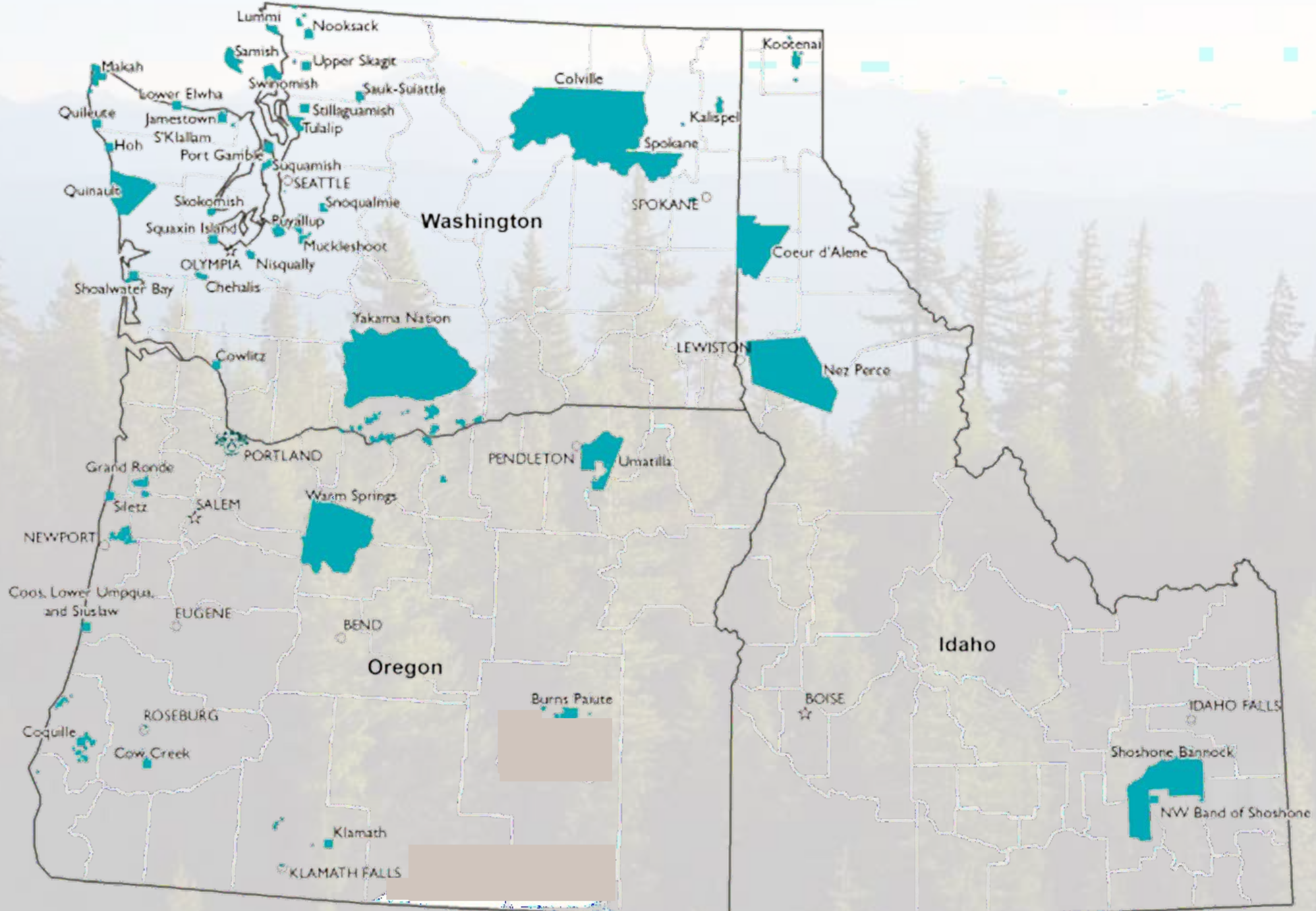
Northwest Portland Area Indian Health Board

Established in 1972

- ▶▶ Non-profit tribal advisory organization serving the 43 federally recognized tribes of Oregon (9), Washington (29), and Idaho (5).
- ▶▶ Each member tribe appoints a Delegate via tribal resolution and meets quarterly to direct and oversee all activities of NPAIHB
- ▶▶ 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.

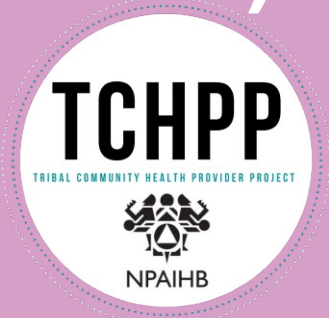
<https://www.npaihb.org/>





Tribal Community Health Provider Program (TCHPP)

ESTABLISHED 2015



Dental Health Aide/Therapist (DHA/T)



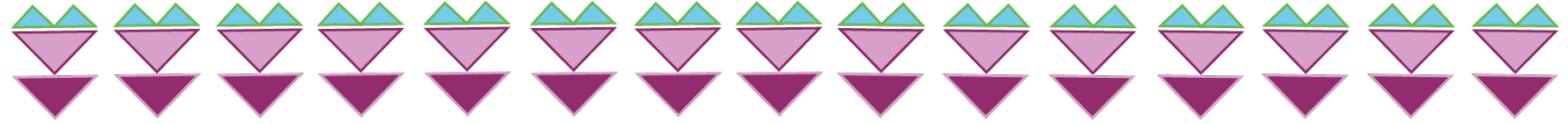
Behavioral Health Aide/Practitioner (BHA/P)



Community Health Aide/Practitioner (CHA/P)



CHAP Disciplines



Dental Health Aide/Therapist (DHA/T)

DHATs 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. DHATs 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.



Alaska Community Health Aide Program (CHAP) Origins

1950's Originated in response to the TB Epidemic

1960's Indian Health Service (IHS) established the Community Health Aide Program (CHAP) in Alaska.

1970's Congress amends the Indian Health Care Improvement Act (IHCIA) to authorize the CHAP expansion (PL 94-437)

1990's Alaska CHAP Program Certification Board formalized.

<https://akchap.org/>



2000's Dental Health Aide and Behavioral Health Aide Programs created and certified

2020 Nationalization of the CHAP Program



Nome, AK
August 2022

Indian Health Care Improvement Act (IHCIA)

The cornerstone legal authority for the provision of health care to American Indians and Alaska Natives, was made permanent when President Obama signed the bill on March 23, 2010, as part of the Patient Protection and Affordable Care Act.
https://www.ihs.gov/sites/ihcia/themes/responsive2017/display_objects/documents/home/USCode_Title25_Chapter%2018.pdf

Circular 20-06 CHAP Nationalization

To implement, outline, and define a National Community Health Aide Program (CHAP) policy for the contiguous 48 states. The policy encompasses community-based provider selection, culturally tailored care and curriculum, and competency-based education. The policy is also inclusive of health aides as part of a team of healthcare providers focused on providing effective, efficient, and patient-centered care, consistent with the structure of the Alaska CHAP. This policy implements the statutory requirements of the Indian Health Care Improvement Act (IHCIA) that apply to CHAPs operated by the Indian Health Service (IHS) and Indian Self-Determination and Education Assistance Act (ISDEAA) contractors outside of Alaska.
<https://www.hhs.gov/guidance/document/indian-health-circular-20-06>

National Certification Board & Standards & Procedures

The NCB is a federal board chaired by the IHS Chief Medical Officer (CMO) or his or her delegate and may be comprised of Federal and Tribal representatives from each ACB. Functions of the NCB and board composition are addressed in the Standards and Procedures. Adopted in part from the Alaska CHAPCB Standards and Procedures to outline the minimum program standards for all CHAP provider types operating outside of Alaska. The National CHAP Standards and Procedures include, but are not limited to, the minimum training, training equivalency, supervision, and scope of practice requirements.

Area Certification Board & Standards & Procedures

The ACBs are federal certification boards located in the contiguous 48 states and may be comprised of Federal and Tribal representatives. Their membership must include at least one federal representative appointed by the respective IHS Area Director. The ACB establishes board composition in its standards and develops the procedures of each respective board to certify individuals as their respective provider types. At a minimum, the Area Standards and Procedures must include the National CHAP Standards and Procedures and may have additional supplemental requirements above and beyond the national standards that are specific to the cultural considerations of the region, community specific needs, as well as the health care delivery system.

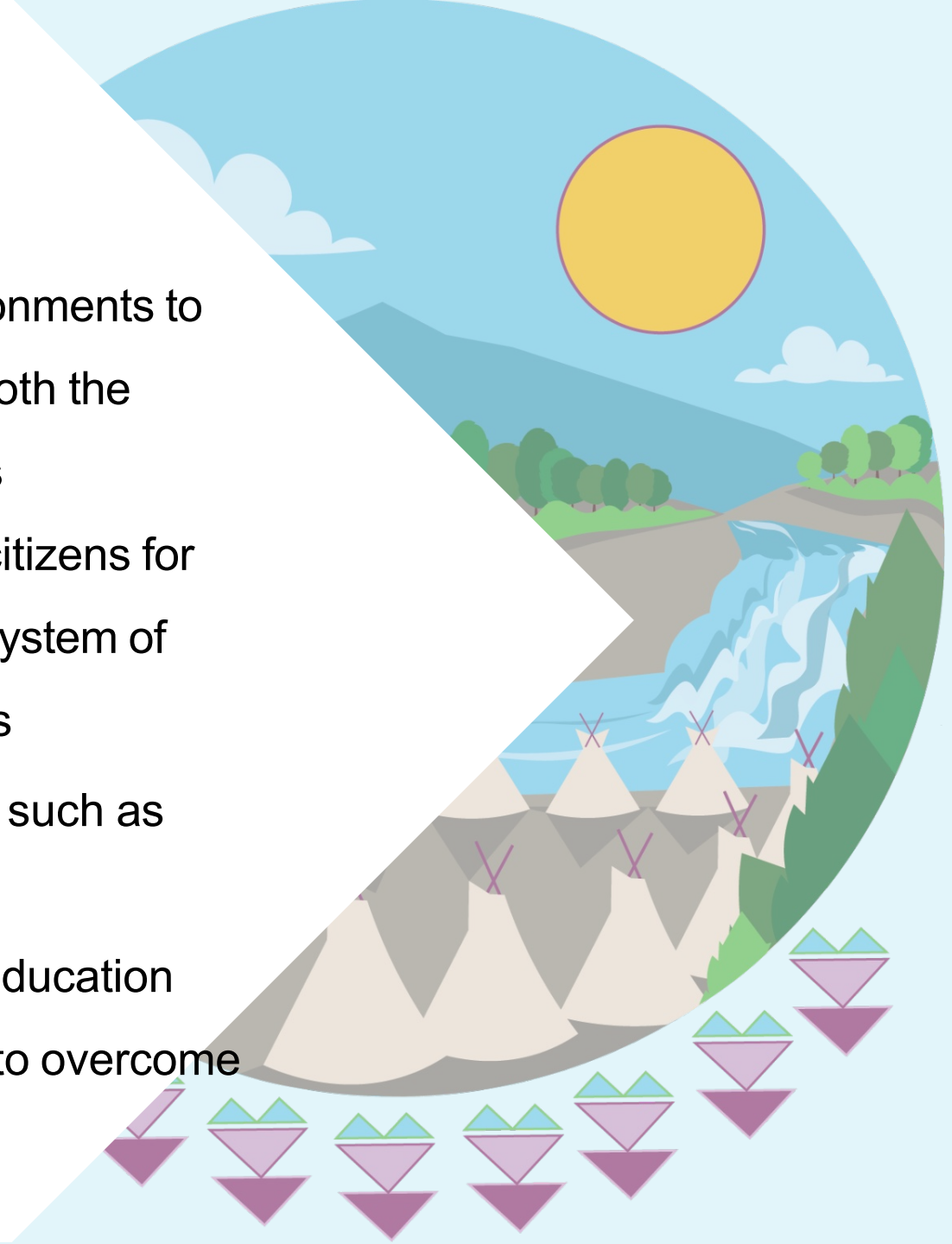
Portland Area CHAP Officially Recognized

IHS Director formally recognizes the Portland Area CHAP Certification Board (PA CHAP CB) and reaffirms appointments by former Portland Area IHS Director Dean Seyler for the purpose of making certification recommendations



Why do we need Health Aide Providers?

- ▶▶ CHAP was developed to sit outside state regulatory environments to give tribes and tribal health programs the ability to tailor both the education and regulation of providers in their communities
- ▶▶ The current system of health care has been failing tribal citizens for centuries – CHAP is an opportunity for tribes to shape a system of provider education and regulation to truly meet their needs
- ▶▶ CHAP addresses important social determinants of health such as education attainment and financial security
- ▶▶ CHAP was designed to circumvent structural barriers to education and healthcare that tribal communities have worked hard to overcome



CHAP Addresses Social Determinants of Health



- Accessible care
- Provider stability
- Improve systems of care

➤ Accessible Education



➤ Healthier communities

- Trauma-informed care
- Social influence
- Culturally competent workforce

➤ Healthcare career



<https://www.cdc.gov/publichealthgateway/sdoh/index.html>

Historical Trauma and Lack of Culturally Competent Providers

Dentists in the US by Race

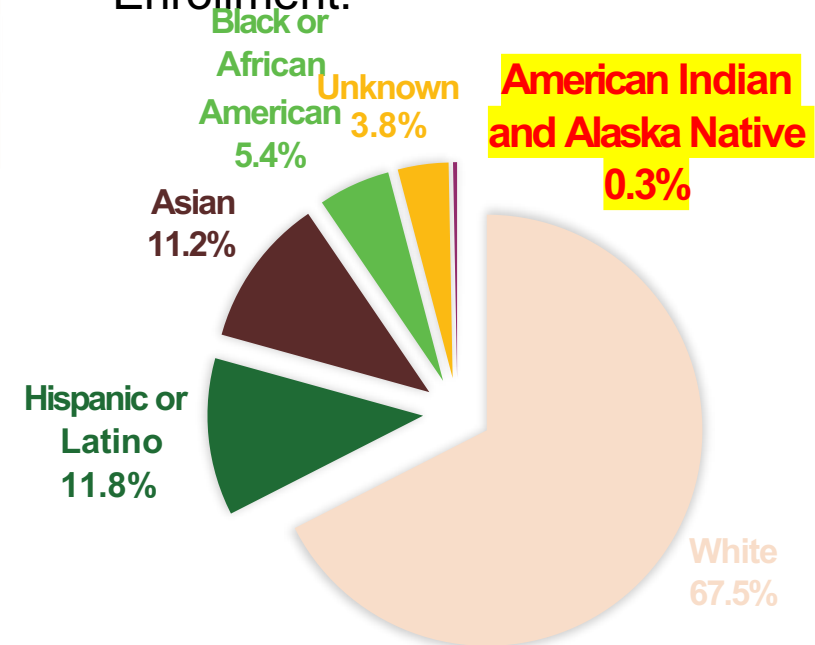
Native American	0.1%
Asian/Pacific Islander	7%
Black/African American	3.5%
Hispanic/Latino	3.5%
White/Caucasian	86%

Source: American Dental Association, Bureau of Health Professions, HRSA

Therapists in the US by Race	Percentages
White	76.4%
Asian	10.6%
Hispanic or Latino	6.3%
Black or African American	4.1%
Unknown	2.2%
American Indian and Alaska Native	0.4%

Source: <https://www.crossrivertherapy.com/therapist-statistics>

Out of the estimated 5.2 million American Indians and Alaska Natives (AI/ANs) in the U.S., about **3,400 are physicians, just 0.4% of the physician workforce**, according to a 2018 AMA Council on Medical Education report, "Study of Declining Native American Medical Student Enrollment."



PHYSICIANS ASSOCIATES BY RACE

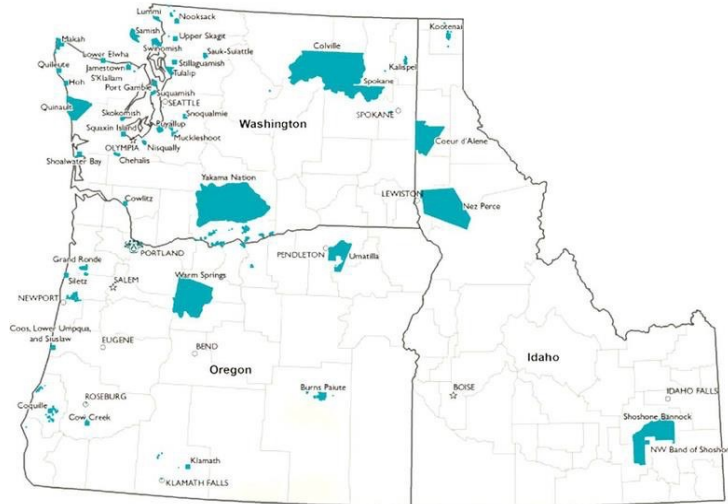
Source: <https://www.zippia.com/physician-assistant-jobs/demographics/>

Northwest Tribal Needs Assessment



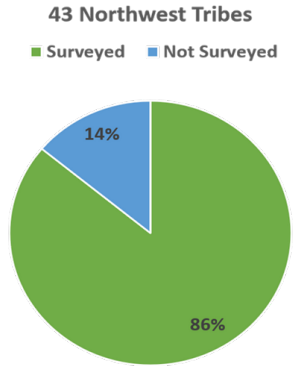
Purpose

- 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.



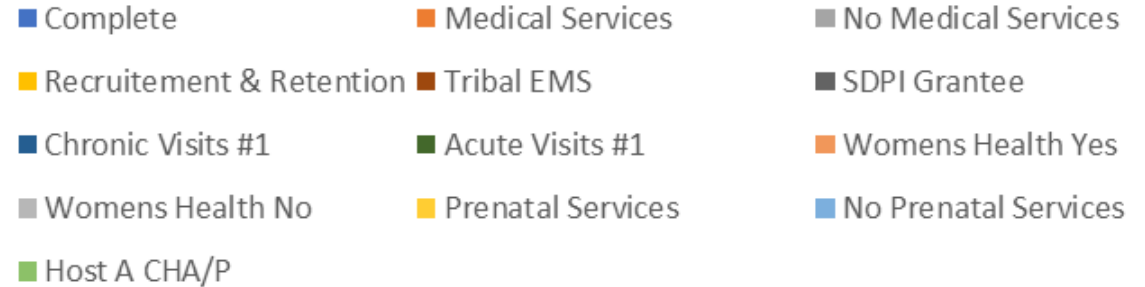
- Identify tribal health organizations who have the capacity and interest in implementation.
- What do tribes know about CHA/P.

86 % of NW tribes who have medical services have completed the survey.



- Recruitment & Retention challenges include
 - 1. Location
 - 2. Salary
 - 3. Housing
- User population ranged from 400-9,000.
- Provider-to-patient ratio ranges from 1:150 to 1:2,250
- Routine visits average 30 minutes.

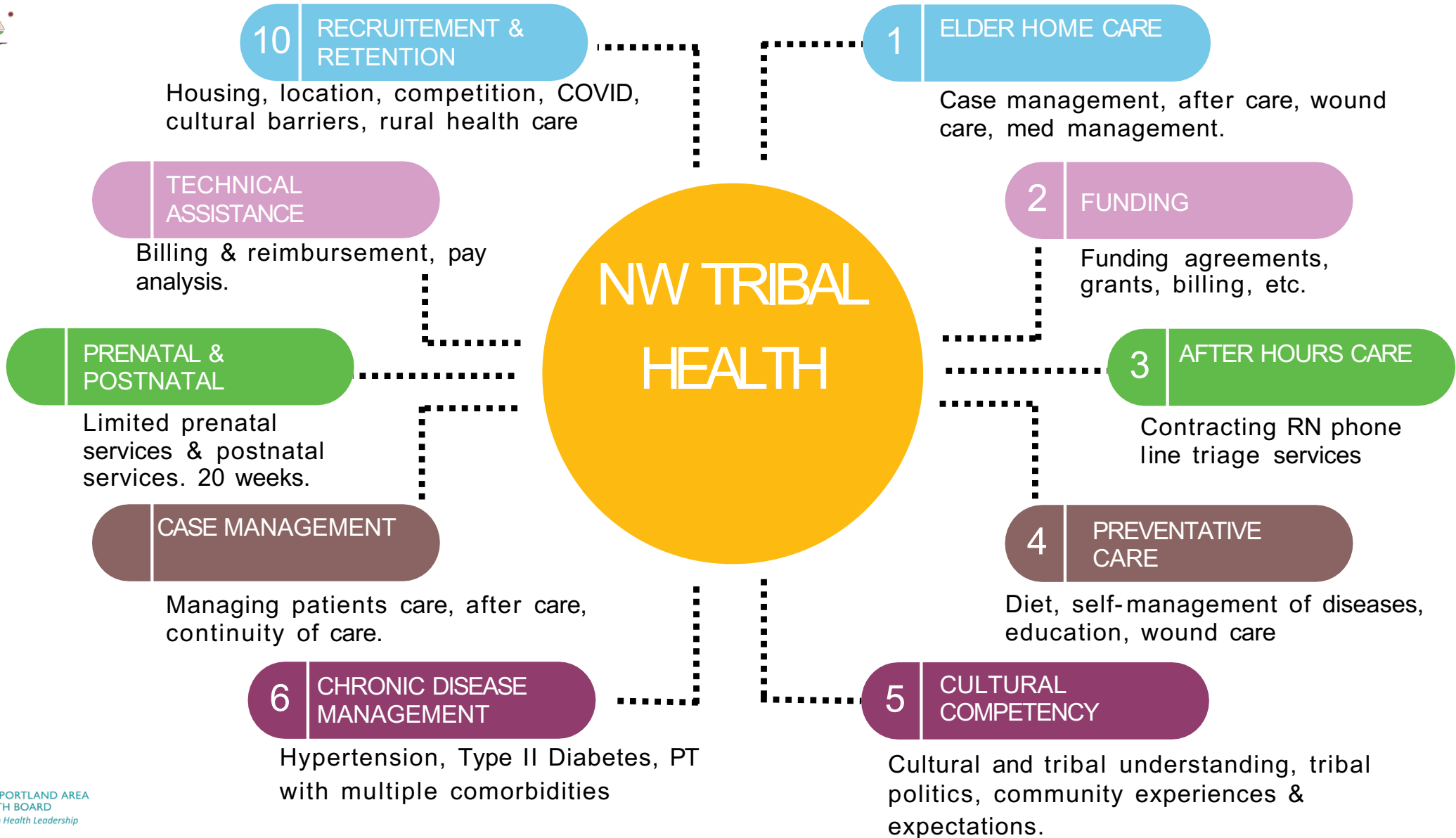
2022 NEEDS ASSESSMENT SUMMARY





NORTHWEST TRIBAL HEALTH NEEDS

MARCH 2022 - CURRENT

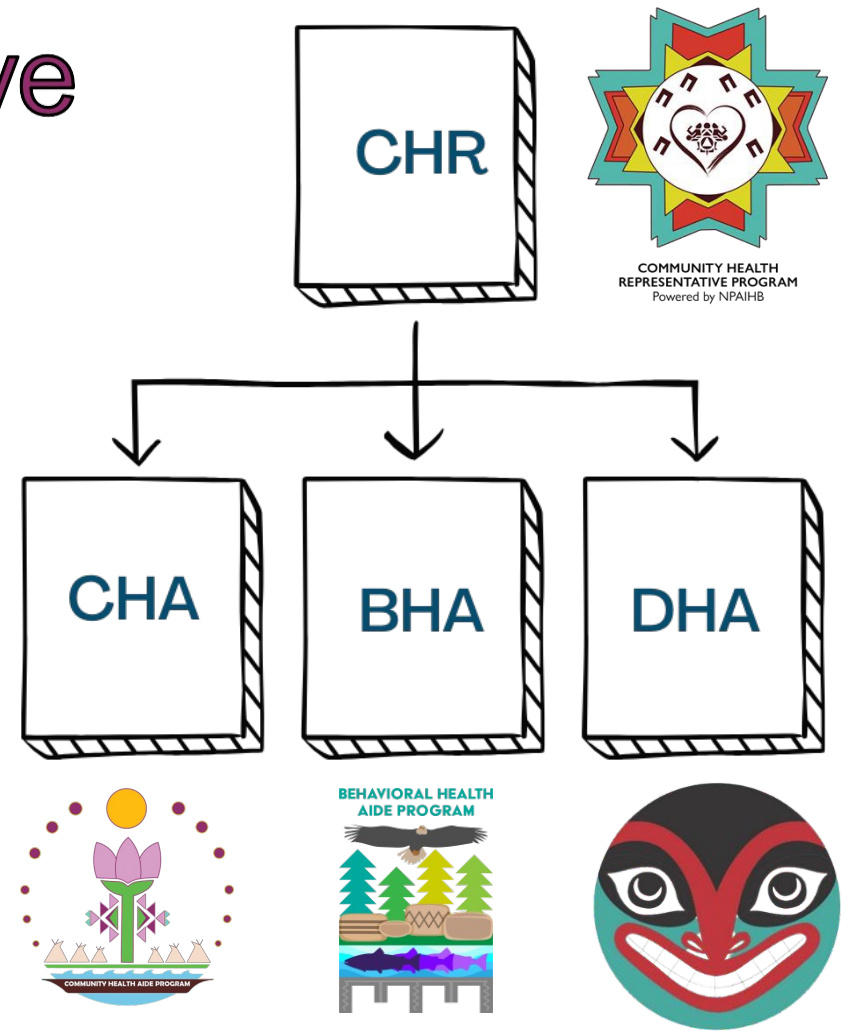




**COMMUNITY HEALTH
REPRESENTATIVE PROGRAM**
Powered by NPAIHB

Community Health Representative Introduction

- ▶▶ CHRs are considered the original CHW workforce program.
- ▶▶ 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 healthcare 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 in meeting their healthcare needs. By providing health education and reducing hospital readmissions, CHRs have contributed to lowering mortality rates. The demand for CHRs continues to grow.
- ▶▶ CHRs are considered the original CHW workforce program.





BECOME A COMMUNITY HEALTH REPRESENTATIVE (CHR)

WHAT IS THE CHR PROGRAM?

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. **CHR's are frontline public health workers who are trusted members of the community with a close understanding of the community, language, and traditions.**

EXAMPLES OF CHR TASKS

- ▶ Provides health screenings and basic medical care
- ▶ Helps patients fill out medical forms
- ▶ Transports patients to and from appointments
- ▶ Advocates for individuals and communities
- ▶ Home checks for elders
- ▶ Coordinates care for community members
- ▶ Provides patient outreach

LEARN MORE

Please don't hesitate to reach out with questions!



Stephannie Christian
TCHP Education Director
schristian@npaihb.org



MorningRose Louie
TCHP Education Data Coordinator
mlouie@npaihb.org

BENEFITS



Apply your knowledge as a CHR to advance in any discipline in the community health field! CHR topics apply to students of any age and a wide spectrum of health career paths.



CHR is a great place to advance in the Community Health Program. Recruiting for Community Health Aides, Behavioral Health Aides, and Dental Health Aides often happens through the CHR program.



Keep indigenous talent in your community and Tribal Health Organization rather than having it drawn out of the community. A thriving CHR program supports the entire health delivery system.

CHR Education Program

Now Recruiting! Start date of October 3, 2024

- Core course NPAIHB is offering the Core CHR Course through Idaho State University
- training offers a culturally specific curriculum designed for Indigenous students.
- Students taking only the Core Course will be eligible for up to \$1,000, students who continue onto the Advanced Course will receive an additional \$3,000
- Northwest (ID, OR, WA) students will receive priority enrollment

CORE COURSE



AT A GLANCE

Designed for students who are new to the medical field and are looking for an entry level position.

- Students receive educational supplies as part of student support.
- Northwest students receive priority enrollment.

Course Information:

Start Date: **October 3rd, 2024**

Completed over **8 weeks**

37 hours of online coursework

9 hours of interactive live Zoom sessions

6 live Zoom sessions on **Thursdays, 3-4:30pm PT**

Get paid while you learn!

New students are eligible to receive up to **\$1,000** in scholarship funding

COURSE TOPICS

Boundaries in Health Care

Cultural Competency

Communication Skills

Health Disparities

Outreach and Advocacy

Health Literacy

Interviewing

Health Insurance

Tribal Health Systems

Self-Care

Health Equity

For more information or questions contact:



MorningRose Louie
TCHP Education Data
Coordinator

mlouie@npaihb.org



Now recruiting!
Apply by **September 19th**

ADVANCED COURSE



Eligible for 40 hours of CEUs

AT A GLANCE

Designed for students who are already CHR's looking to advance their education into becoming a **Community Health Aide (CHA), Behavioral Health Aide (BHA), or Dental Health Aide (DHA)**.

- Students receive educational supplies as part of student support.
- Northwest students receive priority enrollment.

Course Information:

Start Date: **August 6th, 2024**

Completed over **6 weeks**

38 hours of online coursework

14 hours of interactive live Zoom sessions

9 live Zoom sessions on **Tuesdays and Thursdays, 3-4:30pm PT**

Get paid while you learn!

New students and returning students from the CHR Core Course will receive **\$1k-3k** in scholarship funding

COURSE TOPICS

Introduction to CHA, BHA, and DHA

Ethics and Professionalism

Medical-Legal Informations

Indigenous Oral Health

Healing from Historical Trauma

Health & Wellness

Vital Signs

Emergency Preparedness

Aging and Elder Issues

Diabetes

For more information or questions contact:



MorningRose Louie
TCHP Education Data
Coordinator

mlouie@npaihb.org



Now recruiting!
Apply by **July 23rd**



Community Health Aide/Practitioner

Community Health Aide Practitioners (CHAP) are certified primary care clinicians who have close cultural ties and connections to the communities they serve. In Oregon, Washington, and Idaho they are community members of AI/AN communities who attend CHAP educational programs approved by the Portland Area CHAP Certification Board and work within the Tribal Health and Human systems.

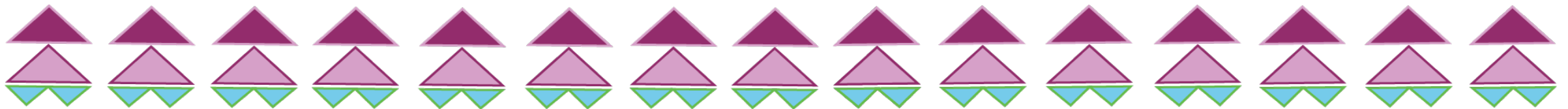
- *A CHAP practices under the supervision of a licensed clinical provider, such as a physician or advanced practice provider (PA, NP).*
- *Basic education for CHAP includes didactic learning, skills practice and training, and clinical time providing patient care with the guidance of an advanced practice provider or physician.*

Grassroots
Dependable
Indigenous
Wellness
Flexible
Empowered
Community
Extension of Healthcare
Nurturing
Tribal
Tribal
Homegrown
Nurturing
Warm
Compassion
Outgoing
Tribal
Cultural
Critical
Grassroots
Health
Caring
Homegrown
Nurturing
Grassroots
Dependable
Indigenous
Sharing
Compassion
Flexible
Community
Sharing
Critical
Compassion
Health
Caring
Helper
Health
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Northwest Community Health Representative Training

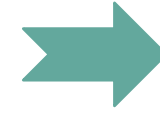
Training Outline

- Core training- 48 hours coursework, 12 hours of live Zoom
- Advanced Training- 48 hours online coursework, 12 hours live Zoom

Total: 120 hours total to earn a CHR Advanced Completion

Scope of Work:

- Care Coordination
- Outreach and Advocacy
- Community Support
- Assessment and Evaluation
- Home Visits
- Transportation



CHR

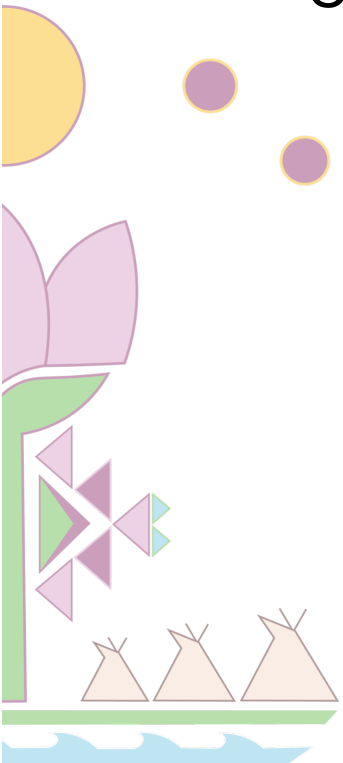
Community Health Representative

CHA

Community Health Aide

CHP

Community Health Practitioner



Northwest Community Health Aide Training

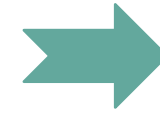
Training Outline

- 320 hours of didactic training
- 200 hours of clinical
- 80 patient encounters

Total: 520 hours total to earn a CHA Completion

Scope of Work:

- Acute Care Visits
- Chronic Care Visits
- Diabetic and HTN
- Elder Care
- STI Screening
- Recheck Visits
- Emergency Triage



CHR

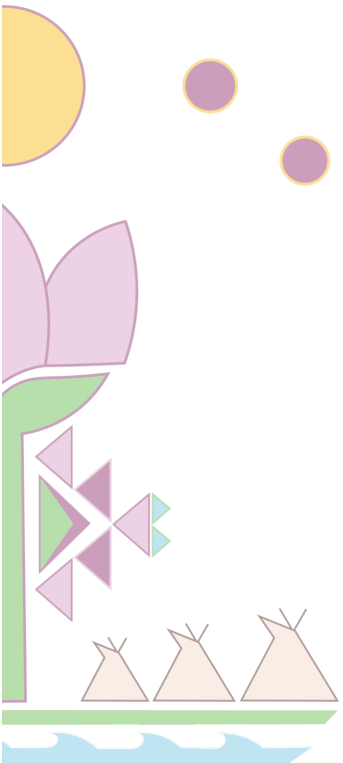
Community Health Representative

CHA

Community Health Aide

CHP

Community Health Practitioner



Northwest Community Health Practitioner Training

Training Outline

- 320 hours of didactic training
- 400 hours clinicals
- 132 patient encounters

Total: 720 hours total to earn a Community Health Practitioner Certification

Scope of Work:

- Acute Care Visits
- Chronic Care Visits
- Diabetes and HTN
- Elder Care
- STI Screening
- Recheck Visits
- Emergency Care
- Prenatal Care
- Well Child Care
- Addiction Medicine
- Preventative Visits



CHR

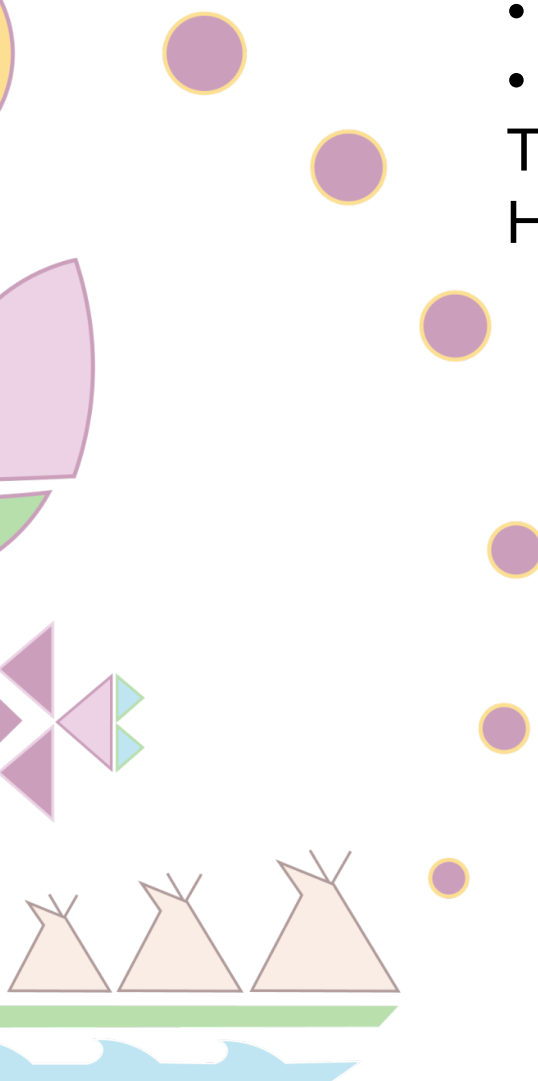
Community Health Representative

CHA

Community Health Aide

CHP

Community Health Practitioner



How to become a CHA/P?

2 years of training

- Pre-session
- 5 Quarters
- Mix of didactic and clinical skills training, and preceptorship

Clinical training performed at 4 pilot sites

- 2 in Idaho
- 1 in Oregon
- 1 in Washington

Certification Exam

Credential Maintenance

- Regular CME completion
- Renew emergency training regularly
- Retake CHA/P credentialing exam and preceptorship at regular intervals



Medical Supervision for CHA/P's

Supervisory Roles for CHA/P's

▶ 1. Supervising Physician

- ▶ Must be an MD or DO
- ▶ Responsible for signing the Consulting Provider Agreements (CPA's)
- ▶ Hold the license under which the Health Aides practice
- ▶ May collaborate with the CMP

▶ 2. Consulting Medical Provider (CMP)

- ▶ Can be a Physician Associate (PA-C), Nurse Practitioner (NP/ANP), Medical Doctor (MD), or Doctor of Osteopathy (DO) that work for the tribal health organization or the Federal Government and must hold a current license in the practicing state.
- ▶ Responsible for the day to day consultation of patients.
- ▶ Quarterly patient chart review
- ▶ Responsible for Individual Clinical Learning Needs (ICLN's) after each quarter
- ▶ May offer recommendations on the CPA's to the Supervising Physician
- ▶ Can oversee a max of 6 CHA/P's per provider

▶ 3. Mentors/Skills Instructors (Provided by NPAIHB CHAP Education Center)

- ▶ Can be a PA, NP, ND, MD, or DO that work with the NPAIHB
- ▶ Responsible for the skills training and knowledge education of the CHA/P.
- ▶ Provide weekly mentor check-ins.

▶ 4. On Sight Supervisor

- ▶ Someone in a managerial or human resource role at the sight the CHA/P is practicing.
- ▶ In charge of day to day, on sight issues such as approving time sheets and leave.

What does it mean to have a CHA/P under my license?

- ▶ CHA/P's will be credentialed and certified after completion of each quarter's requirements. They will not hold a license to practice medicine.
- ▶ Therefore CHA/P's will reside under the license of an eligible Supervising Physician in order to practice medicine.
- ▶ The Supervising Physician must be an MD, or DO.
- ▶ CHA/P's are covered by Federal Tort Act just like all other providers.



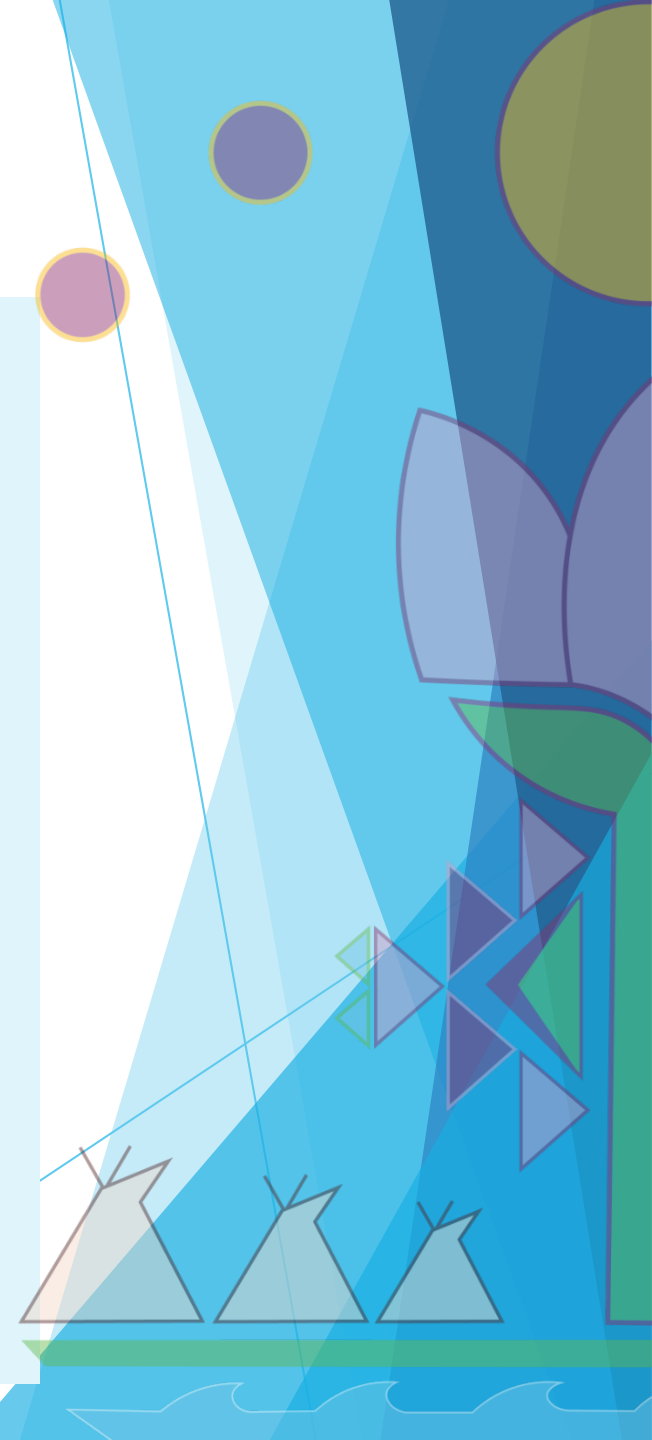
Federal Tort Claims Act Coverage (FTCA)

- ▶ “Eligible health centers and covered individuals (i.e., governing board members, officers, employees, and certain individual contractors) are immune from civil lawsuits when they have been deemed as federal employees for the purposes of FTCA liability protections when the act or omission is the performance of medical, surgical, dental, or related functions resulting in personal injury, including death, and occurring within the scope of employment (including within the approved scope of project). In qualifying circumstances, the Department of Justice, rather than private counsel, defends lawsuits that are within the criteria for coverage.”
- ▶ Federal Tort covers all CHA/P’s that operate within their scope of practice.
- ▶ Health Aides have been successfully practicing with doctors for 60 years.
- ▶ Health Aide scope of practice is very well defined and outlined to ensure their scope of practice is adhered to.

What is a CHA/P's Scope of Practice

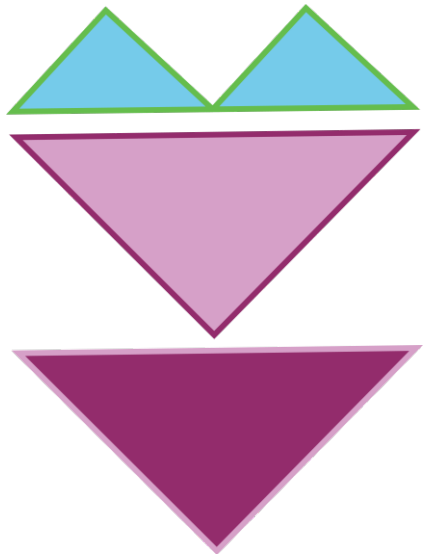
A CHA/P's Scope of Practice includes any knowledge or skill they have proven competent in during training, AND that is covered in the eCHAMP, AND that their licensed CMP is able to perform themselves.

- ▶ The Electronic Community Health Aide Manual for Practice (eCHAMP) is a manual that guides the CHA/P through every patient encounter.
 - ▶ It must be used with every patient visit.
 - ▶ Training on how to use the eCHAMP is taught in every Quarter.
 - ▶ The eCHAMP guides the Health Aide with history questions and appropriate exams for each specific patient complaint.
 - ▶ The eCHAMP provides Assessment charts to guide in correct Assessment of patient conditions.
 - ▶ Plans for each Assessment offer specialized step by step care instructions.
 - ▶ The entire visit has safety protocols embedded throughout, to allow for patient to risk out if their needs exceed the CHA/P's scope of practice and requires CMP consultation.



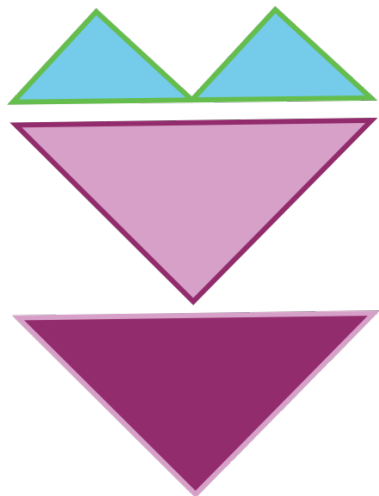
Comparison to Medical Providers

	Physicians	Nurse Practitioners & Physician Associates	Community Health Aide Practitioners
Practices under their own license	Yes	Yes	No
Visit length	15-30 minutes	15-30 minutes	1 hour
Training in Primary Care, Emergency Medicine, Women's Health/Prenatal Care, Elder Care, Pediatrics.	Yes	Yes	Yes
Certification requires Continuing Medical Education	~ 100 hours every two years	~ 100 hours every two years	~ 40 hours every two years
Take call	Yes	Yes	Yes
Work in clinic alone	Yes	Yes	Yes
Services can be billed with Medicare and Medicaid	Yes	Yes	Yes
Services can be billed with third party insurances	Yes	Yes	Some
Administers Vaccinations	Yes	Yes	Yes
Education	HS Diploma Bachelor's Degree Medical Degree Varying residency Certification/Board Exam(s)	HS Diploma Bachelor's Degree Master's or Doctoral Degree Varying residency Certification/Board Exam(s)	HS Diploma 6-8 grade reading/math proficiency 3 training sessions Post Session pt visit # & type req't 2 Week Preceptorship/Cert Exam
Medication privileges	Prescribes	Prescribes	Dispenses
Diagnostic skills	Make Diagnoses	Make Diagnoses	Make Assessments
Performs sports physicals	Yes	Yes	No
Interprets complex labs (CBC, CMP, HgA1c, etc.)	Yes	Yes	No
Interprets basic labs (UA, Pregnancy Test, Rapid Strep or Flu Test, etc.)	Yes	Yes	Yes
Performs pap smears	Yes	Yes	After additional training with supervising physician



Comparison To Members of Healthcare Team

	<u>Medical Assistant</u>	<u>Nurse</u>	<u>Community Health Aide Practitioner</u>
Takes Vital Signs	Yes	Yes	Yes
Pushes IV Meds	No	Yes	No
Places Urinary Catheters	No	Yes	No
Draws Blood	Yes	Yes	Yes
NG Tubes	No	Yes	No
Patient Education	Yes	Yes	Yes
Required Continuing Medical Education	No	Yes	Yes
Administers Vaccinations	Yes	Yes	Yes
Interpret Simple Labs (UA, Pregnancy Test, Blood Sugar, etc)	Some	Yes	Yes
Interpret Complex Labs (CBC, CMP, HgbA1c, etc)	No	Some	No
History Taking Skills	Basic	Nursing Model	Medical Model
Physical Exam Skills	Basic	Nursing Model	Medical Model
Diagnostic Skills	No	Nursing Model	Assessments
Education	HS Diploma One semester program	HS Diploma AD, BS, MS Board Certification	HS Diploma 6-8 grade reading/math proficiency 4 training session 3-4 weeks each Post Session pt visit # & type req't 2 week preceptorship/cert exam

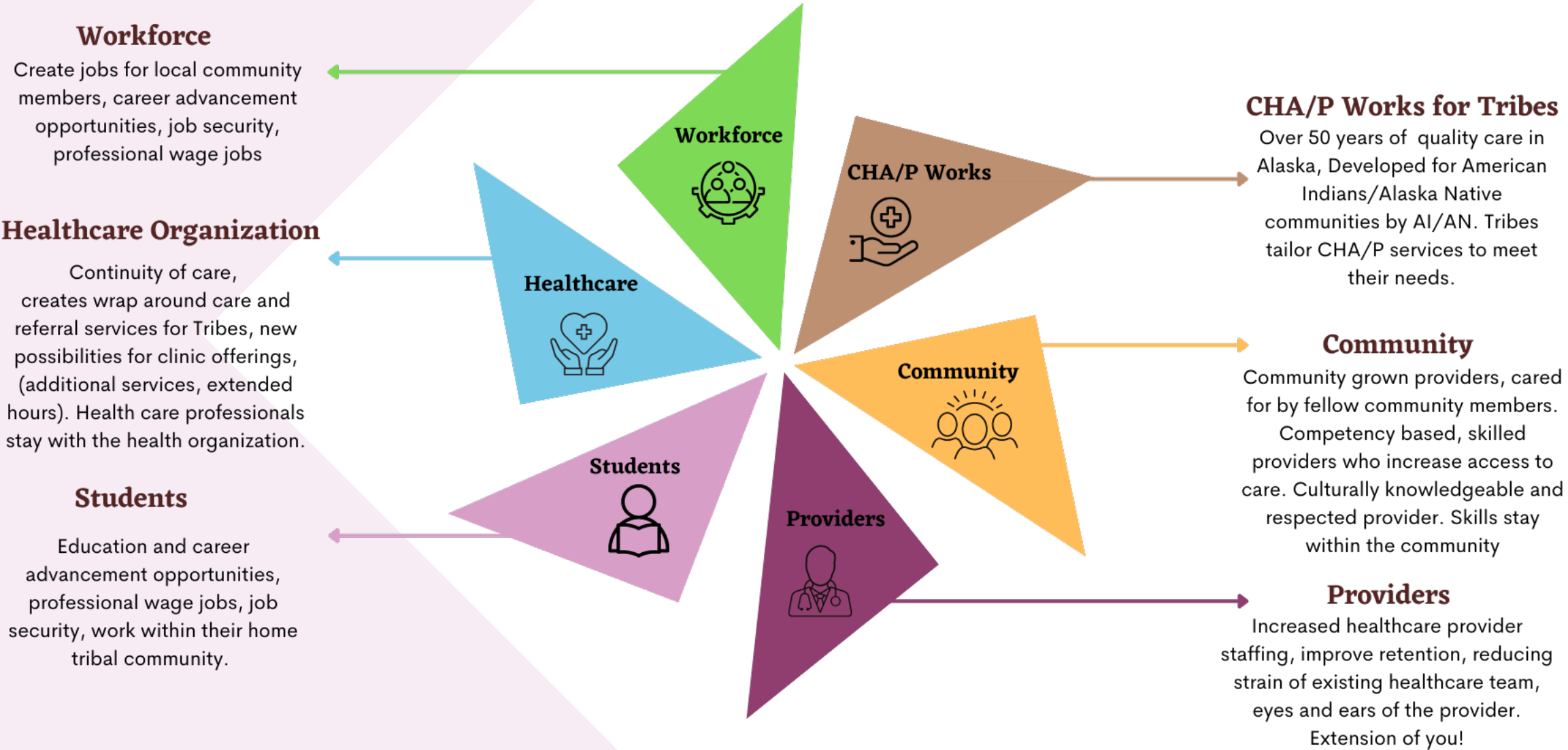


Potential Methods of CHA/P Integration

- ▶▶ Acute care visits
- ▶▶ Triage/case management
- ▶▶ Basic chronic care visits
- ▶▶ Well and sick child visits
- ▶▶ Wound care visits
- ▶▶ Prenatal care visits
- ▶▶ STI clinics
- ▶▶ Vaccination Clinics
- ▶▶ Extending clinic hours
- ▶▶ Seeing after-hours acute visits/phone consultations to reduce ER visits



Benefits of a Community Health Aide/Practitioner



SCAN ME



TO VIEW the CHAP FAQ

COMMUNITY HEALTH AIDE/PRACTITIONER

FREQUENTLY ASKED QUESTIONS



HOW TO BECOME A COMMUNITY HEALTH AIDE PRACTITIONER?

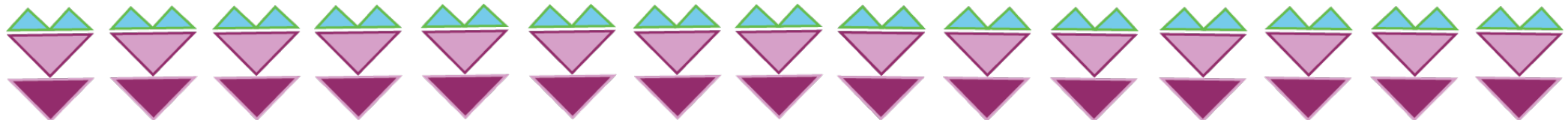
CHA/Ps attend 614 hours of didactic education and skills of the series of six quarter and perform 836 hours of clinical time. The minimum required hours total 1450 hours.

	Course Title	Hour Commitment	Additional Info
CHR	CHR Core	52 hours over an 8-weeks	Employer should allow 1.5 hours a week for live zoom courses
	CHR Advanced	52 hours over a 6-weeks	Employers should allow 3 hours a week for live zoom courses
	CHA Foundations	60-80 hrs over a 6-8 weeks	Employer should allow 10 hours a week for this course
CHA PerP	BLS	4-12 hours depending on course	NPAIHB Approved healthcare provider BLS course. In person or hybrid online with in person skills
	E.H.R Training	Time Commitment dependent on employers usual training	
CHA	CHA 101	186 hrs online coursework + 30 hrs onsite skills + 24 hrs clinicals. Total of 240 hours over 12 weeks	Employer should allow 20 hours a week for this course
	CHA 102	112 hrs online coursework + 56 hrs onsite skills + 72 hrs clinicals. Total of 240 hours over 12 weeks	Employer should allow 20 hours a week for this course
	CHA Internship	200 hours of clinicals that includes being an active participant* and the primary provider*	CHA/P's have 5 weeks to finish this. Employers can decide how to arrange hours that is best for the CHA/P and Consulting Medical Provider
CHP	CHP 201	80 hrs online coursework + 40 hrs onsite skills + 120 hrs clinicals. For a total of 240 hours over 12 weeks	Employer should allow 20 hours a week for this course.
	CHP 202	72 hrs online coursework + 48 hrs onsite skills + 120 hrs clinicals. For a total of 240 hours over 12 weeks	Employer should allow 20 hours a week for this course
	CHP Internship	200 hours of clinicals that includes being an active participant* and the primary provider*	CHA/P's have 5 weeks to finish this. Employers can decide how to arrange hours that is best for the CHA/P and Consulting Medical Provider
	CHP Preceptorship	60 Hours (combined assessment, skills & clinicals) over a 2-week time period	Additional 5 hours of written testing will be proctored by NPAIHB staff



NORTHWEST PORTLAND AREA
INDIAN HEALTH BOARD

TCHPP Connecting with Tribal Pilot Sites





Community Health Aide Training Site Visits

LUMMI



LUMMI



COEUR D'ALENE



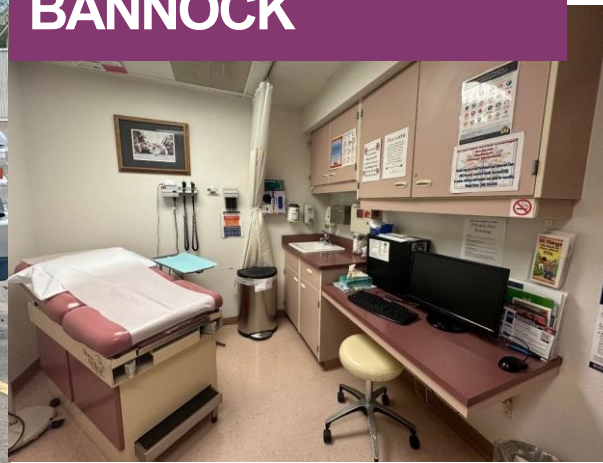
COEUR D'ALENE



SHOSHONE
BANNOCK



SHOSHONE
BANNOCK



UMATILLA



Yellowhawk Tribal Health Center

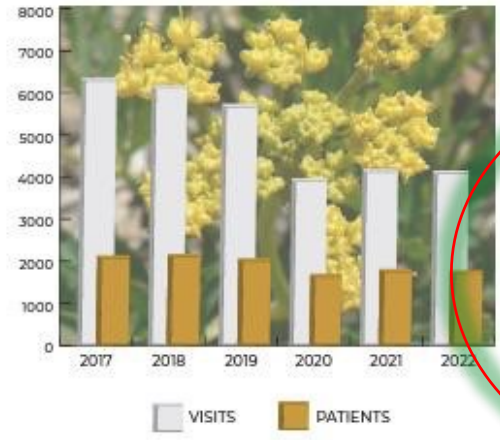
Serving the Confederated Tribes of the Umatilla Indian Reservation

CHA Highlight



Medical

MEDICAL DEPARTMENT VISITS & PATIENTS PER YEAR



Smarter CRC

We continue to collaborate with the SMARTER CRC program to deliver outreach for colorectal cancer screenings. Nursing staff have an integral responsibility in case management. Identifying cancer at an earlier stage provides important information to better treat our patients and prevent secondary cancers.

CHA/P Training

Staff were able to visit Community Health Assistant/Practitioner (CHA/P) training centers in Nome, Bethel and Anchorage, Alaska, which helped us understand the training process and the scope of practice. CHA/P planning and implementation is a program well established in Alaska to meet the health care needs of Alaskan Natives in remote villages. Community members who become a CHA/P are trained to assess and provide urgent, emergent and chronic disease care. Although our health care needs differ from Alaska, this model of care can be utilized to extend services at Yellowhawk.

PHARMACY

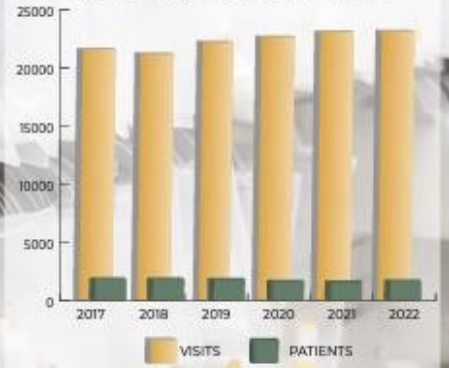
Prescription Volume

Prescription volume has continued to increase over the past few years. Compared to 2018, prescription volume increased a total of 3.5% over time.

PRESCRIPTIONS FILLED ANNUALLY



PHARMACY VISITS & PATIENTS PER YEAR



**BEHAVIORAL HEALTH
AIDE PROGRAM**



**THE PACIFIC
NORTHWEST'S**

**BHA
EDUCATION
PROGRAM**

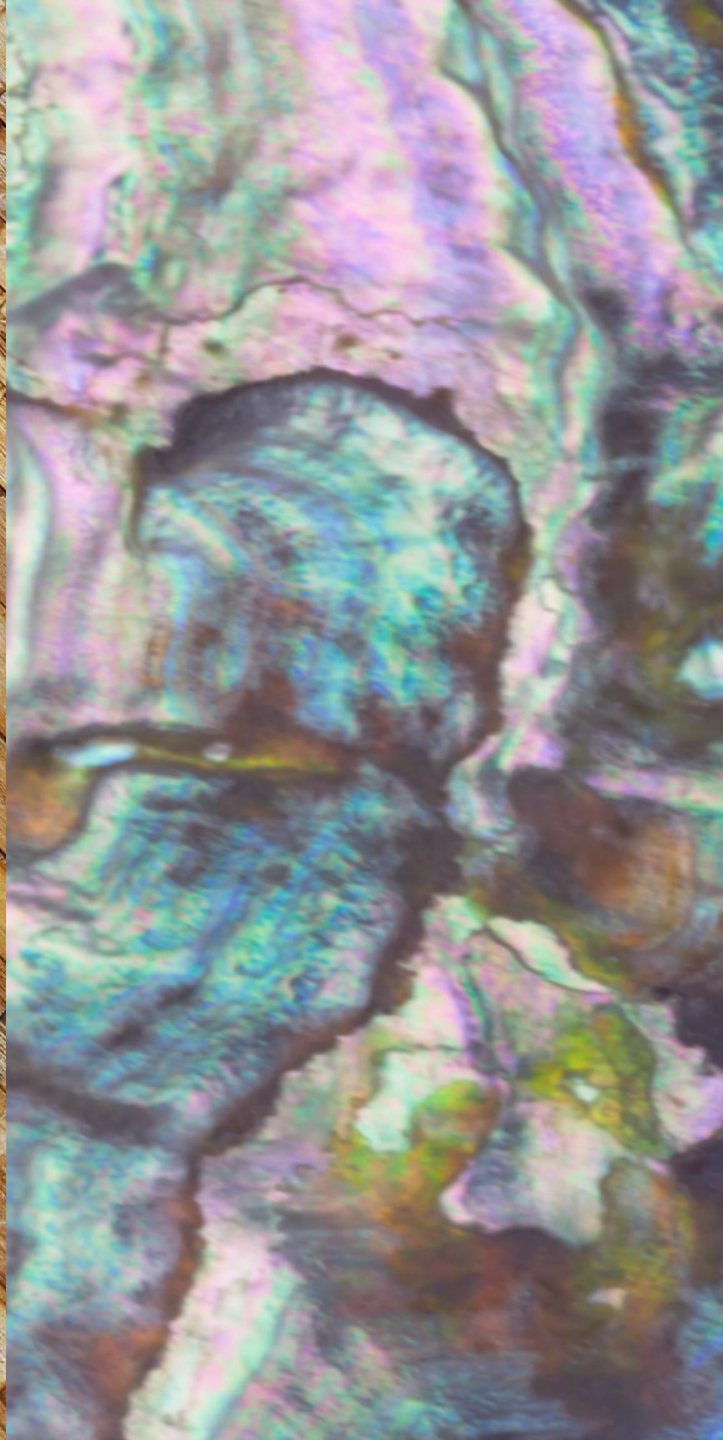
WHO WE ARE



**KATIE
HUNSBERGER**
BHA Program Manager



DOLORES JIMERSON
BH Education Director



BHA SCOPE OF PRACTICE

BHA levels 1-4/P vary depending on coursework, work experience, and incoming credits for higher education. All work must be completed under a Master's level or above clinician.

01

- Wellness promotion
- Education advocacy
- Community needs assessment
- Screening/intake/referral
- Crisis management
- Case management
- Orientation to Services
- Life skills development
- Psycho-education
- Individual & group interventions

02

- Substance use disorder (SUD) assessment
- SUD diagnosis
- SUD treatment planning
- SUD treatment implementation
- Community readiness assessment
- Individual group, family counseling

03

- Treatment planning & implementation for co-occurring disorders
- Child/outh services
- Clinical case review
- Quality assurance case review

04

- BHA mentoring
- Child-centered interventions

BHA/P 1-4 Clinical Practicum Requirements

Level	Hours	Details
BHA 1	1.25 hours 2.25 hours 3.35 hours	<ol style="list-style-type: none">1. Providing initial intake and client orientation to services, including screening and initial intake paperwork with appropriate case documentation.2. Providing case management and referral with appropriate case documentation.3. Providing Tribal based community education, prevention, & early intervention with appropriate case documentation.
BHA 2	1.35 hours 2.30 hours 3.25 hours	<ol style="list-style-type: none">1. Providing client substance use assessment and treatment planning using DSM patient placement criteria with appropriate case documentation.2. Providing rehabilitative services with appropriate case documentation.3. Providing community readiness evaluation & prevention plan development with appropriate case documentation.
BHA 3	1.25 hours 2.25 hours 3.35 hours	<ol style="list-style-type: none">1. Providing initial intake and client orientation to services, including screening and initial intake paperwork with appropriate case documentation.2. Providing case management and referral with appropriate case documentation.3. Providing Tribal based community education, prevention, & early intervention with appropriate case documentation.
BHA 4 (Practitioner)	1.20 hours 2.25 hours 3.30 hours	<ol style="list-style-type: none">1. Engaging, mentoring and supporting, as well as participating in supervision and evaluation of BHA 1, 2, and 3s based on their understanding of supervisee's level of knowledge and skills, professional goals, and behavior.2. Providing clinical team leadership by leading clinical team case review.3. Building cultural competence and relationality by learning about Native Tribal cultural context and developing a wellness framework within which positive therapeutic relationships can be developed.

NOTE: All BHA trainees must be supervised by a Master's level Clinical Supervisor. Clinical Practicum hours may be completed through their academic institution practicum, as well as their behavioral work within their Tribal Health Organization.

NORTHWEST BHA EDUCATION PROGRAMS

HERITAGE UNIVERSITY

- Private university in Toppenish, Washington near Yakama Nation
- **Behavioral Health Aide Certificate**
- Semester-Based
- Some in-person classes with some online sessions
- 2 year program

NORTHWEST INDIAN COLLEGE

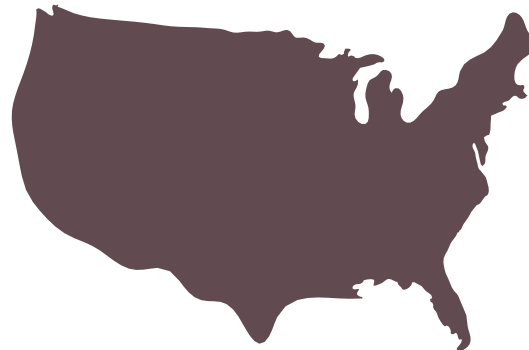
- Tribal College on Lummi Nation in Bellingham, Washington
- **Associate in Technical Arts in Behavioral Health Aide**
- Quarter/Term-based
- Mostly online courses
- 2 year program



BHA Community Impact



Current BHA Cohort = 54



BHAs from Oregon,
Idaho, Washington,
Montana, South Dakota
and Oklahoma



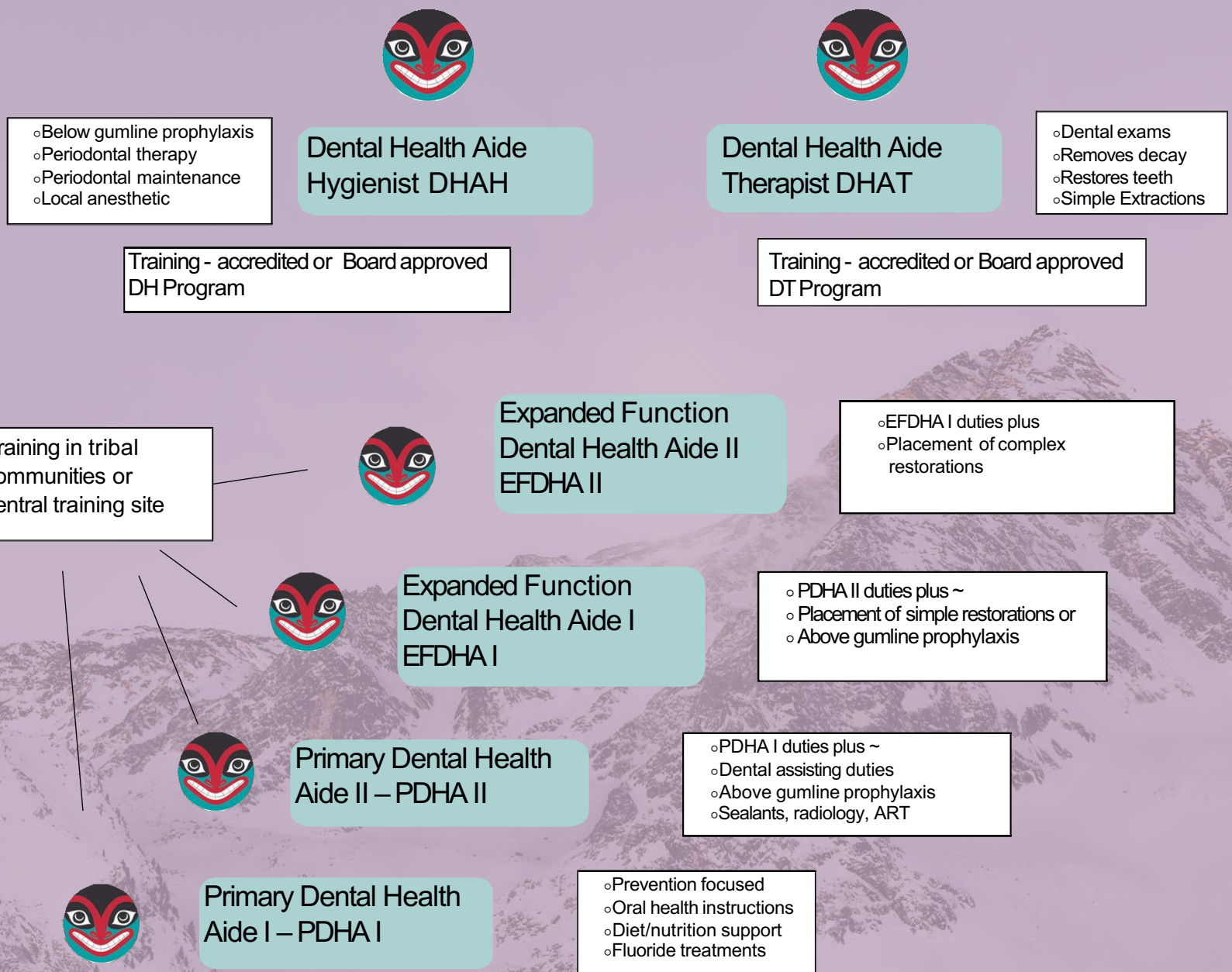
Employed: Headstart,
Domestic Violence,
Elders Programs,
SUD/Recovery Coaches,
Screening/Intake, Case
managers, Children's MH



THE PACIFIC NORTHWEST'S
DENTAL HEALTH AIDE
PROGRAM

The Dental Health Aide Program

- A series of accessible oral health careers
- Working in Indian Health Service and Tribal Communities
- All types of DHAs are supervised by a dentist or DHAT
- Federally certified dental providers



DHAs Increase Access and Efficiency



Marissa Gardner, DHAT, LDT, Oregon, 2019

PDHA

- OH, motivational interviewing
- Polish, antimicrobials, fluoride
- Dental Assisting

EFDHA

- Place Restorations
- PDHA services
- Above gumline prophylaxis

DHAH

- RDH procedures including local anesthesia

DHAT

- Exam, diagnose
- Prep, restore and finish
- Non-surgical extractions
- supervising PDHAs & EFDHAs

Dentist

- Complex services (RCT, crowns, surgery)
- Supervising Dental Health Aides

Goals of the Portland Area CHAP Certification Board

CERTIFY HEALTH AIDE PROVIDERS

Certification
application review
and
recommendation of
Tribal BHA/Ps,
DHA/Ts, and
CHA/Ps;

CERTIFY HEALTH AIDE EDUCATION PROGRAMS

Certification of all
Tribal education
and training
programs created
for BHA/Ps,
DHA/Ts, and
CHA/Ps;

CERTIFY HEALTH AIDE CONTINUING EDUCATION UNITS

Certification of all
Tribal education
and training
programs created
for BHA/Ps,
DHA/Ts, and
CHA/Ps;

ADDRESS DISPARITIES AND STRUCTURAL RACISM

Address health
disparities within the
Tribal Health System
(THS) by review and
recommendation of
individual, education
programs and
continuing education.

WHY CHAP MATTERS



- Addressing structural racism and Tribal sovereignty in all levels of the work
- Proven history of safe, quality care in Alaska for over 50 years
- Uniquely developed for Tribes using the Alaska model
- Tribes can tailor their programs to fit their needs
- Increases AI/AN local workforce and creates career paths
- Providers are home grown and culturally knowledgeable
- Competency based, skilled providers who increase access to care
- Extend the reach of services into hard to access areas



OUR COMMON GROUND

We can and should “grow our own” providers, create jobs in our communities, and establish and support an education system that breaks down barriers to training health professionals from tribal and other underrepresented communities.

CHAIRMAN CLADOOSBY, SWINOMISH TRIBE

Questions?



NORTHWEST PORTLAND AREA
INDIAN HEALTH BOARD

<https://www.npaihb.org/>



<https://www.tchpp.org/>

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