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CME Information:

Application for Continuing Medical Education (CME) credit has been filed with the American Academy of Family Physicians. Determination of credit is pending. Please see the registration desk for more information on how to apply for credit.



Acronym Key

CDS	Clinical Decision Support
CHC	Community Health Center
FQHC	Federally Qualified Health Center
EHR	Electronic Health Record
MLP	Medical Legal Partnership
PCMH	Patient-Centered Medical Home
LEP	Limited English Proficiency
DOAC	Direct Oral Anticoagulant
NHSC	National Health Service Corps
HRSA	Health Resources and Services Administration

Welcome Message

Dear Conference Attendee,

It is my pleasure to welcome you to our 2018 Annual Conference and to thank you for attending what I anticipate to be an exciting, collaborative, and informative next couple of days. This year's conference celebrates 22 years of bringing together health professionals from around the nation to share knowledge and best practices for serving our most vulnerable populations.

This year's theme, *Engaging Partners to Improve Care*, is designed to highlight successful partnerships in Policy, Practice, and Workforce. During the course of this conference, we encourage you to interact and build networks with the like-minded individuals around you. We are delighted to offer 20 different workshop sessions, 5 general sessions, 10 poster presentations, and numerous exhibitors within our conference program. Our workshop presenters, speakers, and exhibitors are here to interact with you, learn from your experiences in the field, and engage in a constructive dialogue on how to best serve our communities as a team.

We are also excited to introduce our revitalized membership committees and would love for you to get involved. The Program, Membership, and Policy & Advocacy committees will all play a major role in driving ACU's agenda going forward. Please check your registration materials for information on signing up and feel free to ask any questions regarding committee involvement at the registration desk.

You are also encouraged to take part in Hill Day on Wednesday, August 1. We are extremely proud of the role ACU played in fixing the National Health Service Corps' cliff for two years; however, there remains a great deal of work ahead as we aim to restore funding for the NHSC to the annual Appropriations process. As clinicians dedicated to improving the health of our nation's most underserved communities, you have the personal experience and the power to change minds and build champions through these advocacy efforts.

Thank you for attending ACU's 2018 Annual Conference, and as always, we thank you for your unwavering commitment to improving the health of America's underserved populations. We hope that all attendees will return to their practices with new knowledge and strategies to share with their organizations. We hope that you enjoy your stay in Washington, DC and look forward to meeting you during the conference!



Virna Little, PsyD, LCSW-R, SAP

ACU Board of Directors



Virna Little, PsyD, LCSW-R, SAP
President

Behavioral and Integrated Health Care
New York, NY



Felix L. Nuñez, MD, MPH
Vice President

Public Health, Public Policy,
Disparities
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Interdisciplinary Care, Homeless
and Migrant Populations
Portland, ME



Adrian Billings, MD, PhD
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Presidio County Health Services
Rural Health
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Earle Rugg
Director

Health Information Exchanges
and Technology
Portsmouth, NH



Rohit Abraham
Director- Health Professional in Training

Michigan State University
College of Human Medicine
Harvard T.H. Chan School of Public Health
East Lansing, MI



Jim Hotz, MD
Director

Primary Care, Public Policy,
Cancer Screening
Albany, GA



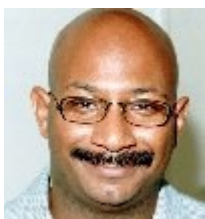
Juli Hishida, MS
Director- Health Professional in Training

Tennessee State University
National Health Care for the Homeless
Council
Nashville, TN



Michael Mank, DO
Director- Health Professional in Training

Chicago College of Osteopathic
Medicine
National Health Service Corps Scholar
Chicago, IL



Ellis Frazier, MD
Director

Family Medicine, HIV/AIDS
Chillicothe, OH

General Sessions

Corcoran Ballroom

Partnerships in Social Equity

Monday, July 30
8:30AM-9:45AM



Antoinette D. Carroll
Founder, President, and CEO, Creative
Reaction Lab

Creative Reaction Lab is a nonprofit social enterprise that educates, trains, and challenges cities to co-create solutions with Black and Latinx populations to design healthy and racially equitable communities. Within this capacity, Ms. Carroll has pioneered a new form of creative problem solving called Equity-Centered Community Design. This is a unique design process that focuses on a community's culture and needs so that they can gain tools to dismantle systemic oppression and create a future with equity for all. The talk will offer clinicians a unique perspective to help tackle topics such as advancing health equity, improving quality, and helping to eliminate health care disparities in underserved communities.

Partnerships for Improved Clinical Outcomes

Monday, July 30
12:15PM-2:30PM



Sanjeev Arora, MD, FACG, MACP
Director and Founder, Project ECHO

Project ECHO (Extension for Community Healthcare Outcomes) is a collaborative model of medical education and care management that empowers clinicians everywhere to provide better care to more people, right where they live. Launched in 2003 by Dr. Arora, the ECHO model makes specialized medical knowledge accessible wherever it is needed to save and improve people's lives. By putting local clinicians together with specialist teams at academic medical centers in weekly virtual clinics or teleECHO clinics, Project ECHO shares knowledge and expands treatment capacity. The result: better care for more people. The presentation and subsequent panel discussion will share unique insights into the ways in which technology can improve access to care in underserved communities.

Panelists:

Jim Hotz, MD

Albany Area Primary Health Care, Inc.

Mike Witte, MD

California Primary Care Association

Ági Erickson, MS

Weitzman Institute

General Sessions

Corcoran Ballroom

Partnerships for Reducing Burnout

Tuesday, July 31
8:30AM-10:30AM



Gail Gazelle, MD, FACP, FAAHPM
Physician Coach

The session will focus on what clinicians and their organizations can do to reduce burnout, increase joy, and continue to improve the health of patients amidst the challenges of the healthcare environment.

Panelists:

Cindy Barr, RN, EDAC
Capital Link

Cheryl L. Fattibene, MSN, MPH, CRNP
National Nurse-Led Care Consortium

Partnerships with Federal Policy-Makers

Tuesday, July 31
12:00PM-1:30PM



Capt. Sheila Pradia-Williams, MBA
Acting Deputy Associate Administrator,
HRSA Bureau of Health Workforce

Capt. Pradia-Williams' talk will provide participants with insight as to how the NHSC and the many other workforce programs administered by HRSA, are helping improve quality and access to care for underserved populations.

Closing Session

Tuesday, July 31, 2:30PM-4:00PM

Mr. Kennedy will discuss current ACU programming, including recent work on expanding vision care services to shortage areas. During the session Mr. Kennedy will announce the ACU grant to Hyndman Area Health Center to help establish a vision lane in their community. The grant is part of the program funded by the Centene Foundation for Quality Healthcare, which also includes the vision van. In addition, the session will recognize the winner of the Poster Session competition, and also feature a raffle for conference participants.



Craig A. Kennedy, MPH
Executive Director, Association of
Clinicians for the Underserved



2018 Award Recipients



Clinician of the Year



Amanda Brooks
LCSW, CADC

ACU is proud to recognize Amanda Brooks, LCSW, CADC for her years of dedicated service at PCC Community Wellness Center providing integrated behavioral health services to underserved populations. Ms. Brooks has brought a unique behavioral health perspective to her new role as the Chief Population Health Officer for PCC, an organization that provides essential care to West Chicago at eleven sites. Since joining the PCC Community Wellness Center in 2011, Ms. Brooks has attracted over \$1 million in grant funding and facilitated the implementation of Telehealth and Screening, Brief Intervention, and Referral to Treatment (SBIRT). She also helped launch PCC's first integrated, direct-access Chemical Dependency Clinic, which increases access to medication-assisted treatment. Ms. Brooks is highly active in behavioral health student training and her passion for substance abuse treatment goes above and beyond. ACU is honored to present Ms. Brooks with the 2018 Clinician of the Year award.

Congressional Champion

Congressman G.K. Butterfield of North Carolina is our 2018 Congressional Champion. As a senior Member of the House of Representatives, Congressman Butterfield led the fight to extend funding for the National Health Service Corps in Congress. As funding for the NHSC faced expiration, he rallied his colleagues to support this important program, garnering bipartisan support for his bipartisan bill, the NHSC Strengthening Act of 2017. Congressman Butterfield truly understands the critical role the NHSC plays in recruiting clinical providers to underserved communities, and has seen firsthand the positive impact of the program at health facilities across his rural North Carolina district. We greatly appreciate his successful effort to extend funding for the NHSC and are proud to name him as our Congressional Champion for 2018!



Rep. G.K. Butterfield
(D-NC)

Organizational Excellence



Greater Portland Health
Portland, ME

ACU is proud to recognize Greater Portland Health, located in Portland, ME, for their dedication to expanding quality care to Portland's disadvantaged. The organization provides primary care services, homeless health care services, school-based health services, HIV, Hep C and latent TB treatment, behavioral health, and oral health services. Greater Portland Health has rapidly grown to nine sites since opening in 2009, now serving over 10,000 people – despite being in a state that did not expand their Medicaid program. Our 2018 Organizational Excellence Award goes to Greater Portland Health.

Schedule at a Glance

Sunday, July 29

2:00PM - 6:30PM	CONFERENCE LEVEL	Registration
3:00PM - 6:00PM	BALLROOM FOYER	Exhibitor Set-Up
3:00PM - 6:00PM	DUMBARTON	ACU Board Meeting

	SMITHSON	DOUGLASS
PRE-CONFERENCE TRAINING SESSIONS <i>Pre-reg required</i> 4:00PM - 6:00PM	Making Workforce Work in Your Community	Using Your Voice: Advocacy 101
	SEASONS RESTAURANT—LOWER LOBBY LEVEL	
6:30PM - 8:30PM	<div> <div> WELCOME RECEPTION MC: Ellis Frazier, MD </div> <div> AWARD PRESENTATIONS: Clinician of the Year: Amanda Brooks, LCSW, CADC Congressional Champion: Rep. G.K. Butterfield Organizational Excellence: Greater Portland Health </div> </div> <div> SPONSOR  </div>	

Monday, July 30

Registration Desk Open 7:00AM - 4:00PM

8:00AM - 8:30AM	BREAKFAST BUFFET			
CORCORAN BALLROOM 8:30AM - 9:45AM	<p>OPENING GENERAL SESSION: PARTNERSHIPS IN SOCIAL EQUITY MC: Virna Little, PsyD, LCSW-R, SAP</p> <p>Blessing: Keaulana Holt, Director, <i>Native Hawaiian Health Scholarship Program</i></p> <p>ANTOINETTE D. CARROLL Founder, President, and CEO, Creative Reaction Lab</p>			
Workshop Session #1 9:45AM - 10:45AM	ALGONQUIN	SMITHSON	DOUGLASS	DUMBARTON
	Equity, Education, and Expansion: The New Haven Primary Care Consortium	Best Practices for the Recruitment and Retention of Clinical Providers in Safety Net Clinics	Promoting Growth, Stability & Diversity in Primary Care Workforce: Reaching Across Sectors to Affect Legislative Change	Building Partnerships to Leverage Resources and Improve Health: Addressing Community Needs with Community Assets Through the Live Heart Smart Program
	PRACTICE	WORKFORCE	POLICY	PRACTICE
10:45AM - 11:15AM	COFFEE BREAK Sponsored by: 			
Workshop Session #2 11:15AM - 12:15PM	ALGONQUIN	SMITHSON	DOUGLASS	DUMBARTON
	Purpose, Passion, Partnerships: The Path to Well-Being	Ohio Primary Care Workforce Initiative: Clinical Education and Recruitment	Medical Legal Partnership at HealthLinc: Transforming the Health Care Team	Interprofessional Education's Role in Treating Vulnerable Populations
	WORKFORCE	POLICY	PRACTICE	PRACTICE
12:15PM - 1:30PM	LUNCH BUFFET			
CORCORAN BALLROOM 12:15PM - 2:30PM	<p>GENERAL SESSION: PARTNERSHIPS FOR IMPROVED CLINICAL OUTCOMES MC: Earle Rugg</p> <p>SANJEEV ARORA, MD, FACG, MACP Director and Founder, Project ECHO ECHO Presentation and Panel Discussion</p>			
2:30PM - 3:00PM	REFRESHMENT BREAK Sponsored by: 			
Workshop Session #3 3:00PM - 4:00PM	ALGONQUIN	SMITHSON	DOUGLASS	DUMBARTON
	A Theoretical Approach to Examining the Patient-Centered Medical Home's Potential in Reducing Health Disparities	IT Systems Considerations for Safety Net Disaster Preparedness	An Innovation Pilot: Leveraging a Centralized CDS Repository to Implement Evidence in Practice	Growing Our Own: Introducing All Learners and Professional Students to FQHCs
	POLICY	PRACTICE	PRACTICE	WORKFORCE

Tuesday, July 31

Registration Desk Open 7:30AM - 4:00PM

6:30AM - 7:15AM	MORNING WELLNESS WALK			
8:00AM - 8:30AM	BREAKFAST BUFFET & POSTER PRESENTATIONS			
CORCORAN BALLROOM 8:30AM - 10:30AM	<p>GENERAL SESSION: PARTNERSHIPS FOR REDUCING BURNOUT MC: Marc Overbeck</p> <p>Gail Gazelle, MD, FACP, FAAHPM Physician Coach</p> <p>Workforce Engagement and Retention Panel</p>			
10:30AM - 11:00AM	POSTER JUDGING & EXHIBIT BREAK Sponsored by: 			
Workshop Session #4 11:00AM - 12:00PM	ALGONQUIN	SMITHSON	DOUGLASS	DUMBARTON
	Physician Volunteers Close the Gap on Access to Care via Telehealth Technology	Development of Medical Spanish Curriculum in Primary Care Residency Program	All of Us: Promoting Inclusivity through Research at Community Health Centers	Congressional Crystal Ball: Outlook for the National Health Service Corps and Other Federal Workforce Programs
	WORKFORCE	PRACTICE	PRACTICE	POLICY
12:00PM - 1:00PM	LUNCH BUFFET			
CORCORAN BALLROOM 12:00PM - 1:30PM	<p>GENERAL SESSION: PARTNERSHIPS WITH FEDERAL POLICY-MAKERS MC: Michael Mank, DO</p> <p>CAPT. SHEILA PRADIA-WILLIAMS, MBA Acting Deputy Associate Administrator, HRSA Bureau of Health Workforce</p>			
Workshop Session #5 1:30PM - 2:30PM	ALGONQUIN	SMITHSON	DOUGLASS	DUMBARTON
	Recruitment and Retention of the Dental Workforce at Community Health Centers	The Shortage Designation Modernization Project: An Update on Auto- Health Professional Shortage Area Scoring	Anticoagulant Initiation/Monitoring Assessment Tools and Quick Reference Tables for Managing Patients on DOACs for Stroke Prevention	Caring for Refugees, Asylees, and Other Vulnerable Migrants in New Mexico: Ways to Overcome the Challenges
	WORKFORCE	POLICY	PRACTICE	PRACTICE
2:30PM - 4:00PM	DESSERT & REFRESHMENTS SERVED IN GENERAL SESSION			
CORCORAN BALLROOM 2:30PM - 4:00PM	<p>CLOSING GENERAL SESSION MC: Adrian Billings, MD, PhD</p> <p>CRAIG A. KENNEDY, MPH ACU Executive Director</p>			

Wednesday, August 1

ACU HILL DAY

Lobby 8:00AM - 8:30AM	POLICY PACKET PICK-UP MEET ACU STAFF IN THE FOUR SEASONS LOBBY TO PICK UP YOUR POLICY PACKET FOR THE NHSC BRIEFING.
8:30AM	BUS TO CAPITOL HILL *Please Note: Bus will NOT be returning to the hotel.
SVC 215 10:00AM - 11:00AM	CONGRESSIONAL BRIEFING ON THE NATIONAL HEALTH SERVICE CORPS PROGRAM As part of the budget deal, Congress extended the fund for the NHSC through FY19. Following that action, Congress also included increased funding in the annual appropriations bill to address the opioid crisis facing our country. A panel of national experts - including clinicians and policy influencers - will provide programmatic and policy updates on the NHSC and our request to further strengthen the program into the future.
CAPITOL HILL 11:00AM - 4:00PM	HILL MEETINGS ACU Conference attendees have the opportunity to meet with policy decision-makers and your congressional representatives. This is the time to Make your voice heard in congress! <i>INDIVIDUAL MEETINGS ARE ARRANGED BY ATTENDEES.</i>
CONCLUSION 4:00PM	END OF CONFERENCE



Workshop Session #1

Monday, July 30, 9:45am-10:45am

Equity, Education, and Expansion: The New Haven Primary Care Consortium

Algonquin

Practice

Douglas Olson, MD

Fair Haven Community Health Center

Nearly all care to the underserved in New Haven, Connecticut is provided by three distinct entities: Yale New Haven Hospital (YNHH), Fair Haven Community Health Center (FHCHC) and Cornell Scott Hill Health Center (CSHHC). There are significant opportunities for improved partnerships among the institutions. The New Haven Primary Care Consortium (NHPCC) is being formed through a tri-party agreement among YNHH, FHCHC, and CSHHC to advantage these opportunities and improve the health status of the underserved population of New Haven County. A key component of this unique partnership is the transitioning of much of YNHH continuity training for internal medicine, pediatric, and OB/GYN residents to a community health center setting. The proposed NHPCC model will be able to positively influence the community across many domains and the workshop will address the clinical practice, operational, financial, educational and community implications.

Best Practices for the Recruitment and Retention of Clinical Providers in Safety Net Clinics

Smithson

Workforce

Ashley Colwell, MS, PHR, SHRM-CP

Illinois Primary Health Care Association

In the continuously evolving healthcare environment it can be difficult for health centers and safety net clinics to recruit and retain clinical staff while remaining competitive. Ashley Colwell, Illinois Primary Health Care Association's Associate Director of Clinical Services and Workforce Development, will share strategies clinics can utilize to positively impact their recruitment and retention efforts. Ms. Colwell brings eleven years of Federally Qualified Health Center workforce experience and will share ways you can develop or revitalize the recruitment and retention processes at your clinic. Numerous best practices and resources will be shared. Programs and organizations available to assist health center recruitment and workforce development efforts will also be highlighted. Attendees can leave the session with recruitment and retention ideas that can be easily implemented.

Promoting Growth, Stability & Diversity in Primary Care Workforce: Reaching Across Sectors to Affect Legislative Change

Douglass

Policy

Christina Hicks, MSOD

California Primary Care Association

Beth Wrobel, BSME

HealthLinc

There are numerous strategies that tackle the primary care shortage facing our nation, nearly all of them requiring partnership across sectors. In 2017, CPCA created a Primary Care Workforce Policy Coalition made up of over 60 partners across multiple sectors in order to impact workforce legislative changes that promote growth at all levels of the care team, and ensure that the primary care workforce better reflects diverse and underserved communities. This session will walk participants through the steps of building a policy coalition; delineating roles in an informal collaborative; ensuring effective internal/external communications channels; and fostering agreement and energy around focused policy solutions.

Building Partnerships to Leverage Resources and Improve Health: Addressing Community Needs with Community Assets Through the Live Heart Smart Program

Dumbarton

Practice

Introduction by Rich Buckley, Board President and Trustee of the AstraZeneca HealthCare Foundation.

Karen Kaashoek, BA, RN, MBA

Jess Eglinton

Catherine's Health Center

Those who live in poverty experience multiple complex barriers to achieving equitable health outcomes. The cost burden often falls on Emergency Departments and the broader community, while these individuals and families experience a significant reduction in quality and years of life. Learn how Catherine's Health Center, a Federally Qualified Health Center Look Alike in Grand Rapids, Michigan, improved heart health outcomes for underserved populations through community-based, collaborative programming. This session will help you analyze your community, identify community needs and assets, forge strong, strategic cross-sector partnerships, and leverage resources. Ultimately, you'll learn how to address your community's needs with your community's assets.

Workshop Session #2

Monday, July 30, 11:15am-12:15pm

Purpose, Passion, Partnerships: The Path to Well-Being

Algonquin

Workforce

Sophia McIntyre, MD, MPH, MBA, CPE, FAAFP
Hudson River Healthcare

Burnout is a pervasive problem that is affecting nearly half of healthcare professions across the country. The time to sound the alarm is now! We must act with a sense of urgency because burnout is slowly stealing away the joy of medicine. Burnout is robbing the most vulnerable patients of high quality and compassionate healthcare professionals. Although burnout has reached frightening levels there are partnerships and strategies to reconnect healthcare professionals to their purpose and passion. Join this session to recognize symptoms of burnout and factors that lead to burnout, identify strategies that can be implemented to address burnout, and develop partnerships that can support practices in retaining high quality healthcare professionals.

Ohio Primary Care Workforce Initiative: Clinical Education and Recruitment

Smithson

Policy

Ted Wymyslo, MD
Marie Grady

Ohio Association of Community Health Centers

Various studies and projections show a current and predicted worsening primary care physician shortage. Ohio's Community Health Centers are uniquely poised to teach, inspire, and put to work our next generation of primary care providers by exposing students to rich clinical experiences in our network of advanced, modernized primary care settings. Ohio Primary Care Workforce Initiative Beginnings-House Bill 64, Ohio's state biennial operating budget, including funding (GRF) to support Ohio's Community Health Centers. OACHC proposed a repurposing of the GRF (\$2.7M per year) for workforce development. The OPCWI program is part of the solution to increasing recruitment and retention of providers in areas affected by the vast maldistribution of clinical professionals. Training and education of all primary care team members must continue to move towards the community settings and in particular to FQHCs, located in and serving underserved communities with few alternatives for primary and preventive care.

Medical Legal Partnership at HealthLinc: Transforming the Health Care Team

Douglass

Practice

Beth Wrobel, BSME
HealthLinc
Emma Douglas, Esq.
Indiana Legal Services

In 2016, HealthLinc, an FQHC located in northern Indiana, was thrown in the middle of an environmental disaster when 1,500 patients of its East Chicago clinic were told the West Calumet Public Housing facility was located on top of the USS Lead Superfund Site. The announcement caused stress and concerns for the patients, their health care providers and the community. This presentation will describe the journey that HealthLinc embarked upon, along with Indiana Legal Services, to address the health-harming legal needs this crisis brought our attention to by creating a Medical Legal Partnership (MLP). It began in its East Chicago Clinic, and then expanded to all 10 clinics. Through a grant from the Indiana Clinical and Translational Science Institute in late 2017, HealthLinc began working with the Indiana University School of Medicine and a diverse group of community partners to identify, prioritize and implement evaluation measures related to the HealthLinc MLP initiative.

Interprofessional Education's Role in Treating Vulnerable Populations

Dumbarton

Practice

Pia Valvassori, PhD, ARNP
Health Care Council for the Homeless

Interprofessional education has been endorsed by the Institute of Medicine because of the impact it has on the quality of health care delivery. Health Care for the Homeless and other community health centers serving vulnerable populations are settings in which the complexity of patients lend itself to an interdisciplinary delivery model. Shared decision making and problem solving are integral in health care delivery to persons who are vulnerable and fosters continuity of care. Ultimately, when professionals deliver care incorporating this delivery model the quality of care is enhanced, the cost of care delivery is reduced, and the number of medical errors are reduced. A number of academic institutions are incorporating interprofessional care activities for health-related disciplines including pharmacy, medicine, nursing and social work. The use of interprofessional teams in various contexts could potentially enhance efficiencies in health care delivery and bridge critical gaps in care.

Workshop Session #3

Monday, July 30, 3:00pm-4:00pm

A Theoretical Approach to Examining the Patient-Centered Medical Home's Potential in Reducing Health Disparities

Algonquin

Policy

Denise Anderson, MPH
Primary Care Development Corporation

The purpose of this session is to examine the PCMH model's potential in reducing health disparities utilizing the National Institute for Minority Health and Health Disparities Research Framework. The Minority Health and Health Disparities Research Framework identifies five domains and four levels of influence on Minority Health and Health Disparities. This session will focus on the healthcare system domain of influence and the competencies and/or criteria of PCMH 2017 that can potentially address each of the four levels of influence on minority health and health disparities: individual, interpersonal, community, and societal.

IT Systems Considerations for Safety Net Disaster Preparedness

Smithson

Practice

David Hartzband, D.Sc.
RCHN Community Health Foundation

Natural disasters and other public health emergencies pose unique challenges for healthcare safety-net organizations. During and following a disaster, community health centers, along with other safety-net organizations, must be prepared to provide continuity for existing patients, while addressing triage and emergent needs of community members. They may also be called upon to render additional, more general services to the communities they are located in. Maintaining business and clinical operations in a disaster scenario requires deep and ongoing preparation, redundant technology and effective communication to optimize services even when infrastructure fails. The presentation will briefly review relevant regulations, and examples will be used to illustrate effective preparation, risk assessment approaches and responses that optimize resilience for recovery. Participation from attendees will also be encouraged.

An Innovation Pilot: Leveraging a Centralized Clinical Decision Support Repository to Implement Evidence in Practice

Douglass

Practice

Fred D. Rachman, MD
Alliance Chicago

Lead poisoning in children imposes lifelong health consequences, and affects nearly two thousand children each year on average. In order to address this problem, Alliance Chicago joined with five public health groups to deploy technologies to empower providers who care for pregnant women, children, and families in proactively identifying lead risk and mitigating adverse outcomes and also to contribute to policies to enhance lead prevention. Health Information Technology was leveraged to predict risk and facilitate remediation of lead poisoning hazards before children are poisoned, preventing lifelong detrimental health and development consequences. Multi-sector information management and data sharing demonstrated the potential to yield tremendous benefits as data held by disparate sectors was aggregated to offer more complete, timely and actionable data. Data sharing strategies for quality and safety must be designed to impact individual patient needs while improving the health status of broader populations and leveraging opportunities to improve practice and policies for the benefit of vulnerable populations.

Growing Our Own: Introducing All Learners and Professional Students to FQHCs

Dumbarton

Workforce

Jennifer Genuardi, MD
Rosa Agosto
Urban Health Plan, Inc.

Are you looking to create a pipeline of dedicated clinical staff that understands the FQHC mission? This workshop will describe the approach our institution has taken to overcome common clinical staffing challenges experienced by FQHCs and other public health organizations. Urban Health Plan (UHP), an FQHC network in NYC, has been working with many technical and professional schools to develop a clinical workforce from medical assistants to providers. The organizational commitment to teaching and learning and our process to enable clinical learning at all levels with integration of health system sciences, a new pillar of medical education, has been instrumental. Many of the preconceived ideas and myths surrounding the challenges of primary care have been dispelled during the learners' rotation experience reinforcing our model as an ideal place to practice primary care.

Workshop Session #4

Tuesday, July 31, 11:00am-12:00pm

Physician Volunteers Close the Gap on Access to Care via Telehealth Technology

Algonquin

Workforce

Lisa Bard Levine, MD, MBA

The MAVEN Project

The MAVEN Project (Medical Alumni Volunteer Expert Network) is a 501(c)(3) organization that engages physicians to volunteer their clinical expertise via telehealth technology to medically under-resourced communities across the country. CEO Lisa Bard Levine, MD, MBA will share how The MAVEN Project leverages telehealth technology and physician volunteers to close the gap in access to care and make clinical expertise accessible regardless of geographic location.

Development of Medical Spanish Curriculum in Primary Care Residency Program

Smithson

Practice

Geethi Abraham, MD, MPH

Laura Kahn, MD, MPH

Erie Family Health Center

Language barriers contribute to racial and ethnic disparities in health outcomes for limited English proficiency (LEP) patients. Language concordance between health care providers and patients has been shown to improve health communication and overall patient experience for Spanish-speaking patients. Given the growing demographic of Spanish-speaking patients in the United States and evidence in favor of language-concordant care, it is critical to establish medical Spanish curriculum for healthcare providers, particularly those practicing in underserved, Latino predominant communities. In this presentation, we will describe a toolbox of diverse curriculum activities, ranging from a one-week brief intensive medical Spanish course to four-week international or domestic immersion rotation. We will offer strategies for implementing this curriculum throughout residency and in a variety of settings. We will also share the highlights and the drawbacks in implementing the curriculum.

All of Us: Promoting Inclusivity through Research at Community Health Centers

Douglass

Practice

Amanda Moody

Kathleen Keogh, LMS

Hudson River Healthcare

The National Institutes of Health's All of Us Research Program invites one million people living in the United States to share their unique health information, through survey participation, physical measurement, and biospecimen donation, in order to improve healthcare for everyone. This session provides an overview of the All of Us Research Program, including its intentional focus on inclusion of underserved populations who have historically been underrepresented in research. The role of community health centers in All of Us, individual health center strategies for participant engagement, and the integration of AmeriCorps Members into Program workflows will be discussed.

Congressional Crystal Ball: Outlook for the National Health Service Corps and Other Federal Workforce Programs

Dumbarton

Policy

Craig A. Kennedy, MPH

Association of Clinicians for the Underserved

The National Health Service Corps (NHSC) is a critical program helping to support over 10,000 primary care providers across the country. This session will give attendees a history of the funding for the program, recognizing Congressional action earlier this year to extend base funding for the program through FY2019. In addition, Congress has included the NHSC in the debate on addressing the opioid crisis, and expanded the program to include substance use counselors within the NHSC Loan Repayment Program. Discussion will focus on next steps to strengthen and expand the program beyond FY2019, and how individuals can advocate for the program's future.

Workshop Session #5

Tuesday, July 31, 1:30pm-2:30pm

Recruitment and Retention of the Dental Workforce at Community Health Centers

Algonquin

Workforce

Bittie Behl-Chadha, PhD
Linda Cragin

University of Massachusetts Medical School

To improve access to oral health care, many community health centers (CHCs) have expanded to offer dental services, but little is known about the recruitment and retention of this vital workforce. The overarching purpose of this study of the dental workforce at CHCs in Massachusetts is to support CHC leadership with information to guide and improve dental staff recruitment and retention. The study aims to uncover what motivates the dental workforce to work at CHCs as well as the barriers to working at CHCs, and shed light on potential recruitment and retention strategies and challenges. The findings are based on qualitative in-depth interviews with dental directors and a survey of dentists, limited license dentists, dental hygienists, and dental assistants.

The Shortage Designation Modernization Project: An Update on Auto-Health Professional Shortage Area Scoring

Smithson

Policy

Melissa Ryan
Elisa Gladstone

Health Resource & Services Administration

As the Health Resources and Services Administration's (HRSA) Shortage Designation Modernization Project moves toward a national update of automatically designated Health Professionals Shortage Areas (Auto-HPSAs), an understanding of Auto-HPSA scoring criteria is essential. The presenters in this session discuss Auto-HPSA scoring criteria and the data that HRSA plans to use for a series of impact analysis reports to be delivered later this year.

Anticoagulant Initiation/Monitoring Assessment Tools and Quick Reference Tables for Managing Patients on DOACs for Stroke Prevention

Douglass

Practice

Haya Ahram, MD
Rafik Yacoub, PharmD, BCGP
Urban Health Plan, Inc.

Direct Oral Anticoagulants (DOACs) have recently been introduced as innovative anticoagulants that do not require regular laboratory monitoring, compared to their vitamin K antagonist counterparts. However, caution needs to be exercised in correct prescription and follow up to satisfy current guidelines and ensure efficacy and safety. Urban Health Plan, a network of Federally Qualified Health Centers (FQHCs) in NYC, designed DOAC initiation and monitoring tools with reference tables. Through literature search, we gathered prescribing and monitoring criteria with updated clinically significant drug interactions, preoperative guidelines and other data to design objective screening, assessment and patient education tools along with prescribing and monitoring algorithms. These tools have aided in the correct prescription and management of patients requiring long term anticoagulation with DOACs.

Caring for Refugees, Asylees, and Other Vulnerable Migrants in New Mexico: Ways to Overcome the Challenges

Dumbarton

Practice

Tapuwa Doreen Mupfumira, MD, MPH
University of New Mexico Internal Medicine

Between 2013 and 2014, an 8.3 million rise in the number of displaced persons was recorded, marking the world's highest level of forced displacement since the Second World War. One in every 122 humans is living either as a refugee, an internally displaced person, an asylum seeker, or a documented or undocumented migrant. Many of these individuals interface with the healthcare system through the emergency department, urgent care centers, inpatient services, or primary care clinics. We describe the challenges associated with caring for refugees and other vulnerable migrants, and provide recommendations relevant to their care.



Poster Presentations

Corcoran Ballroom



Assessing Medical Spanish Proficiency to Improve Quality Care

Desiree Lie, MD

Learning Objectives:

1. Identify the impact of provider Spanish language proficiency on delivery of quality care to low English-proficiency (LEP) patients.
2. Describe student Spanish proficiency performance at the midpoint of a medical Spanish course.
3. Examine correlation of Spanish proficiency scores between students, standardized patients and faculty during a Spanish language Objective Structured Clinical Examination.

1

Using Qualitative Research to Inform Food Insecurity Interventions in an Urban Immigrant Community

Julia Tse, MD

Learning Objectives:

1. To discuss methods and ideas for community engagement and partnership to address social determinants of health, particularly food insecurity.
2. To highlight some challenges in the experience of food insecurity among our patient population.
3. To promote combining community based participatory research with quality improvement projects.

2

Establishing Clinical Education Partners to Improve Health Care for the Homeless: practical implications

Amie Duford, PA-C

Learning Objectives:

1. Describe the demographics of patients most likely to be seen by a mobile health clinic.
2. Explain how patient demographics could help you seek the most effective community partnerships.
3. Identify common challenges to building community partnerships.

3

Addressing Autistic Health Disparities: A Multidisciplinary Community of Practice

Carrie Dickson, DNP, APRN, CNM, CNE

Learning Objectives:

1. Describe the clinical manifestations, prevalence, and health disparities related to autism.
2. Understand the process involved and evidence to support establishing a new Community of Practice.
3. Identify the benefits of participating in a Community of Practice for health professionals focused on autism-appropriate care.

4

Evaluating Patient Navigation to Improve First Appointment No-show Rates in Uninsured Patients with Diabetes

Kendra Weaver, MSN, ACNP-BC

Learning Objectives:

1. To determine if providing patient navigation compared to usual care affects first appointment no-show rates.
2. To determine if providing patient navigation compared to usual care affects HbA1c.

5

Transportation as a Barrier to Care at an Urban Primary Care Clinic

Mark Ryan, MD, FAAFP
Adam Robinson, MS, MUEP, MD
Alex Schloe, MD

Learning Objectives:

1. Recognize common barriers to transportation in clinically underserved urban areas.
2. Examine the relationships between barriers to transportation and clinic attendance at a safety net clinic in an underserved urban area.
3. Formulate possible interventions to improve transportation access at primary care clinics in underserved urban areas.

6



Poster Presentations

Corcoran Ballroom



Academic Practice Partnerships: Preparing NPs for Practice with Underserved Populations

Susan Feeney, DNP
Danielle Hebert, DNP

Learning Objectives:

1. The learner will be able to: Identify specific strategies for increasing NP student preparation for primary care practice with underserved populations.
2. Describe a successful academic practice partnership model that supports NP training for work with underserved populations.
3. Describe specific learning activities to improve NP student knowledge of community resources, team based models of care, and management of patients with acute and chronic health problems.

7

Collaborative Care Partnership Research Project to Reduce Depression and Increase Cancer Screening Among Low-Income Urban Women: Baseline Demographic and Clinical Characteristics of Participants

Andrea Cassells, MPH

Learning Objectives:

1. To describe the rationale for addressing depression in order to improve breast, cervical and colorectal cancer screening rates.
2. To discuss two evidence-based interventions aimed at improving breast, cervical and colorectal cancer screening in older women with depression symptoms.
3. To discuss the value of a community-based partnership approach for reducing cancer screening and depression health disparities.

8

A Multidisciplinary Approach to an Unexpected Vulnerable Refugee Population: Primary Care for Bhutanese-Nepali patients in Central Pennsylvania

Megan Mendez Miller, D.O.

Learning Objectives:

1. Identify areas for improvement in providing primary care to Bhutanese-Nepali refugees within a non-FQHC academic health system.
2. Identify specific health characteristics and major medical diagnoses in this specific refugee immigrant population.
3. Establish methods to assist in overcoming language barriers, health illiteracy, and difficulties in navigating the American Health System in out Bhutanese-Nepali patients.

9

Leveraging Health Information Technology for Evidence-Based Pediatric Blood Pressure Management

Fred D. Rachman, MD

Learning Objectives:

1. Understand the 5 Rights Principles of Clinical Decision Support to enhance clinical practice.
2. Describe technology based strategies for clinician training on clinical guidelines and management.
3. Understand opportunities for partnerships and network based learning such as Project ECHO to enhance clinical practice.

10



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Exhibitors

Expo Hall



CHCI's Weitzman Institute acts as a catalyst for changing and improving the way primary care is delivered by providing specific interventions and resources focused on workforce development, practice transformation and technical assistance. Visit the Weitzman Institute booth to learn more about: Project ECHO, eConsults, Post Graduate Residency and Fellowship Training Programs, NIMAA - Medical Assistant Training, NCA: National Cooperative Agreement, Quality Improvement, Training, Practice Transformation Coaches, and much more



Based in Fort Lauderdale, Florida, Trividia Health, Inc. is a leading developer, manufacturer and marketer of diabetes monitoring and management products. The company offers a portfolio of high-quality blood glucose monitoring systems and diabetes management products available around the world. Trividia Health is the exclusive supplier of blood glucose monitoring systems, co-branded under the TRUE brand and store brand names, to the world's leading pharmacies, distributors and mail service providers.



For over a decade, NCAHD has created national databases of individual provider level physician data with specialty information and ACGME board certification, that can be utilized to find alumni and overlay with underserved, rural and other federal shortage designations to help determine whether your school is meeting its mission. Our team can produce maps, graphs and analysis in support of accreditation reports, grant proposals and for advocacy meetings with stakeholders and policy makers.



The Asthma and Allergy Foundation of America (AAFA) is the nation's oldest nonprofit advocacy organization. AAFA offers patient support via an 800 helpline; email support where patients can Ask the Allergist general questions about allergies and asthma; and peer support via our online communities. AAFA also offers educational materials in digital and print format, news updates and online courses for those newly diagnosed with food allergies or asthma. Visit aafa.org and kidswithfoodallergies.org to learn more.



At TCWD, we are dedicated to improving the health of Tennesseans by guiding healthcare workforce development and connecting the caregivers to people. Our programs include: recruiting and placing physicians and psychiatric nurse practitioners in shortage areas, providing money to medical residents in exchange for a commitment to serve, up to \$30,000 available to hospitals and health centers to attract qualified caregivers, matching medical residents with rural rotations, addressing the issues that cause nurses to leave hospital based employment and educating Tennessee students about the healthcare professions.



Whether you're focused on advancing your career or continuing your education, Drexel offers many programs to help you reach your goals. Our education partnerships with over 1000+ organizations to include healthcare, education, corporate, community colleges, and our academic alliance with the federal government allows you and your immediate family members to receive 10%-40% tuition savings on 150 online degrees and certificate programs that will help you advance your career in the area of public health, nursing, allied health, business, IT and others.

Visit our table for a chance to win 8 "Take a Break" gift bags!



Working with Partner organizations and individuals, HTAF fills the unmet need for simple, cost-effective security and IT infrastructure solutions and services designed and developed for small and medium sized organizations along with the support to make implementation initiatives successful. HTAF also provides health information technology educational access and intern opportunities for individuals who are first to attend college, minorities, and others transitioning in

Exhibitors

Expo Hall



3RNet is a national network of 53 members dedicated to improving rural and underserved communities' access to quality health care through the recruitment and retention of health care professionals and community-based training. Our free, interactive website, www.3RNet.org allows facilities to post jobs in dozens of professions and specialties and connect with candidates across the country.



The Billings Area Indian Health Service (IHS) provides Public Health, Environmental Health, Health care services and community-based disease prevention services to more than 70,000 American Indian and Alaska Native (AI/AN) people in Montana and Wyoming. These services are delivered through six IHS-operated Service Units, three tribally-operated health departments, and five Urban Indian health programs, administratively supported by a regional office located in downtown Billings, Montana. Our mission is to raise the physical, mental, social, and spiritual health of AI/AN to the highest level possible. We are committed to accomplishing this through strong partnerships with Montana and Wyoming Tribal Leadership and other health care partners serving the AI/AN population in these two States.



The Wonderful Company is a privately held \$4 billion global company dedicated to harvesting health and happiness around the world through its iconic consumer brands. Our mission is to transform the paradigm of health and wellness in California's Central Valley, while dramatically improving health outcomes for The Wonderful Company's employees, their families, and the communities in which they live and work. There is no organization in the world that can do what we do. Our outreach and impact goes far beyond providing free access to comprehensive healthcare, and we have fully integrated into our employee's lives and the communities they live in. We are also entrenched in education and work closely with 84 schools and promote wellness to our employees while at work every day. Our mission is to make a meaningful difference in the lives of this vulnerable population, which suffers from the highest levels of obesity and diabetes in the nation.



The Arizona Alliance for Community Health Centers (AACHC) mission is to promote and facilitate the development and delivery of affordable and accessible, community oriented, high-quality, culturally effective primary health care for everyone in the state of Arizona through advocacy, education and technical assistance. The Arizona Department of Health Services (ADHS) mission is to optimize the health of Arizona residents by developing and strengthening systems services to expand access to primary care and other services with emphasis on the health needs of underserved people and areas. Together AACHC & ADHS have formed a strong partnership that has proven to be an effective and innovative healthcare workforce collaborative for the state of Arizona.



The NHSC is a Federal government program administered by the U.S. Department of Health and Human Services, Health Resources and Services Administration, Bureau of Health Workforce that helps bring health care to those who need it most. Since 1972, we have been building healthy communities by connecting primary health care providers to areas of the U.S. with limited access to care. Today, 10,400 NHSC members provide culturally competent care to more than 11 million people. Care is provided to more than 5,000 NHSC-approved health care sites in urban, rural, and frontier areas.

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Centene Corporation has long established itself as a national leader in the healthcare services field. Today, through a comprehensive portfolio of innovative solutions, we remain deeply committed to delivering results for our stakeholders: state governments, members, providers, uninsured individuals and families, and other healthcare and commercial organizations.



CommonWealth Purchasing Group (CPG) is the leading group purchasing organization for community health centers and other community-based non-profit organizations, offering members significant savings on supplies, services, and products they purchase every day. CPG's goal is to enable and support their mission and provide a high level of service and assistance to their procurement departments and administration.

Visit our table in the Expo Hall!



The RCHN Community Health Foundation is a New York-based not-for-profit foundation established to support the national community health center movement through strategic investment, outreach, education, and cutting-edge health policy research. The only foundation in the U.S. dedicated solely to community health centers, RCHN CHF builds on a unique history and long-standing commitment to providing accessible, high-quality, community-based healthcare services for underserved and medically vulnerable populations. For more information: www.rchnfoundation.org and www.chcchronicles.org



Pfizer RxPathways connects eligible patients to assistance programs that offer insurance support, co-pay assistance, and medicines for free or at a savings. For more than 40 years, Pfizer has empowered patients in need with assistance & information so they can get access to the Pfizer medicines prescribed by their doctor. Pfizer RxPathways helps eligible patients find a path to assistance by connecting them to Pfizer programs or resources that best fit their unique needs. To learn more about Pfizer RxPathways and find out if your patients are eligible for assistance, visit www.PfizerRxPathways.com to use our Program Finder, or call a Medicine Access Counselor at 1-844-989-PATH (7284).

Visit our table in the Expo Hall!



Rest & Recreation

Don't forget to take some time for self care!



The Relaxation Room, sponsored by Centene: The Relaxation Room will be available Monday and Tuesday in the Conservatory. Stop by for a massage, to recharge your electronics at the charging station, or to relax in a comfortable, noise-free space.

Wellness Walk: Join ACU Staffers on **Tuesday, July 31** for an early morning two mile walk along the peaceful C&O canal in Georgetown. We'll leave from the Four Seasons Lobby at 6:30am.

Corepower Yoga: Want to work up a sweat? Corepower Yoga is located just a few blocks from the hotel at 1055 Thomas Jefferson St NW. Hot yoga classes are available in the mornings and evenings.