

# NPAIHB Weekly Update

January 7, 2025



NORTHWEST PORTLAND AREA  
INDIAN HEALTH BOARD  
*Indian Leadership for Indian Health*

# Information for Today's Call

## Agenda

- Welcome & Introduction: Nancy Bennett
- Upcoming Indian Country ECHO Sessions
- Events, Resources & Announcements
- NW Tribal Data Hub: Sunny Stone
- Partner Updates
- Questions & Comments
- Please place yourself on mute unless speaking
- Please sign in, using chat box, with your full name and tribe/organization
- Use the chat box for questions, for Q&A after updates and announcements



## Upcoming Indian Country ECHO telehealth opportunities

- **Harm Reduction ECHO** - 1<sup>st</sup> Tuesday of every month at 12pm PT
  - Tuesday, January 7<sup>th</sup> at 12pm PT
  - Didactic Topic: *OpiAID*
  - To learn more and join: <https://www.indiancountryecho.org/program/harm-reduction/>
- **EMS ECHO** - 1<sup>st</sup> Tuesday & 3<sup>rd</sup> Thursday of every month at 5pm PT
  - Tuesday, January 7<sup>th</sup> at 5pm PT
  - Didactic Topic: *Ophthalmic/Eye Injuries and Eye Emergencies*
  - To learn more and join: <https://www.indiancountryecho.org/program/emergency-medical-services-echo/>

## Upcoming Indian Country ECHO telehealth opportunities

- **Community Health Representative (CHR) ECHO** – 3<sup>rd</sup> Monday of every month at 12:00pm PT  
\*Rescheduled in January & February due to the holiday\*
  - Monday, January 13<sup>th</sup> at 12:00pm PT
  - Didactic Topic: *HIV/HCV*
  - To learn more and join: <https://www.indiancountryecho.org/program/community-health-series/>
  
- **VCI ECHO** – 2<sup>nd</sup> Monday of every month at 12pm PT
  - Monday, January 13<sup>th</sup> at 12pm PT
  - Didactic Topic: *Update on Telemedicine and AI: 2025 and Beyond*
  - To learn more and join: <https://www.indiancountryecho.org/program/virtual-care-implementation/>

# Weekly Update Schedule Preview: January

**January 14: No NPAIHB Weekly Update – Quarterly Board Meeting (QBM)**

**January 21:** Tribal Community Health Provider Program, Miranda Davis

**January 28:** Legislative & Policy Updates, Health Policy Team



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Visit [www.npaihb.org/weeklyupdate](http://www.npaihb.org/weeklyupdate) for upcoming topics, past presentations, and more!

# NPAIHB 2025 Community Health Representative (CHR) Courses:

**Core CHR Course – online, 8 weeks**  
Apply by February 28, 2025

**Advanced CHR Course – online, 6 weeks**  
Apply by January 10, 2024

Get paid while you learn and earn a certificate for the CHR Program at no cost – scholarship funding available!

Contact the CHR team to learn more at:  
[mlouie@npaihb.org](mailto:mlouie@npaihb.org)



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**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](mailto:schristian@npaihb.org)



**MorningRose Louie**  
TCHP Education Data Coordinator  
[mlouie@npaihb.org](mailto:mlouie@npaihb.org)

### BENEFITS



**Career  
Advancement**

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.



**Education  
Pathways**

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.



**Community  
Health**

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.

# 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: **March 13th, 2025**

Completed over **8 weeks**

**37 hours** of online coursework

**12 hours** of interactive live Zoom sessions

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

**Get paid while you learn!**  
New students are eligible to receive up to **\$2,950** 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 **February 28th, 2025**

# 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: **January 14th, 2025**

Completed over **6 weeks**

**38 hours** of online coursework

**18 hours** of interactive live Zoom sessions

12 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 are eligible for up to **\$2,200** 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

**Now recruiting!**  
Apply by **January 10th, 2025**

For more information or questions contact:



MorningRose Louie  
TCHP Education Data Coordinator

mlouie@npaihb.org



# Do you have children 0-12 years old?



Meet with local Indigenous Child Passenger Safety Technicians to get answers and learn about proper child passenger safety seat use

- These services are free
- **ALL** questions and concerns matter, we want to help
- Monthly check up station or individual appointments offered

\*Upcoming check up station dates:

~~Monday December 16th, 2 pm - 6 pm~~

Wednesday January 22nd, 2 pm - 6 pm

## Check up station location:

NW Portland Area Indian Health Board  
2121 SW Broadway, Portland, OR 97201



Sign up to meet with a Child Passenger Safety Technician at our December checkup station!

Use the QR Code or input the URL below into your browser:

[carseatcheckup.youcanbook.me](https://carseatcheckup.youcanbook.me)

Contact Olivia with any questions at [owhiting@npaih.org](mailto:owhiting@npaih.org) or call/text **605-407-2417**

\*Appointments are preferred for the check up station and individual check ups, those with appointments have priority, drop in check ups are taken as time allows

Child safety seat resources are available based on need AND your child must be present to receive a seat



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## SAVE THE DATE

### 2025 Emergency Medicine in Rural & Indigenous Communities (emRIC) Gathering – Bridging Cultures, Strengthening Communities

Monday, April 28<sup>th</sup> – Thursday, May 1<sup>st</sup>, 2025  
Muckleshoot Casino Resort, Seattle, WA

- Highlight the importance of cultural humility and understanding in medical practice within rural and Indigenous communities
- Showcase the event as a bridge between diverse cultures and medical expertise
- Focus on the collaboration and collective efforts of healthcare professionals and community leaders

#### **Register & Learn More:**

<https://www.indiancountryecho.org/emric-2025/>



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#### **Who Should Attend?**

Physicians,  
community leaders,  
nurses, advanced  
practice providers,  
pharmacists,  
behavioral health  
specialists, nurses,  
chemical dependency  
counselors, peer  
support specialists,  
medical assistants,  
medics, pre-health  
students, medical  
students, etc.



*Apply for a scholarship (limited) by **January 10<sup>th</sup>, 2025:***  
<https://docs.google.com/forms/d/e/1FAIpQLSdzlVduc7KfetYN9ulH6hbYgLHx8iq-vKWM5br3szJBYnRUVw/viewform>

**Questions?** Contact us by emailing [ECHO@npaihb.org](mailto:ECHO@npaihb.org)

# *NW Tribal Data Hub*

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*Connecting Northwest Tribal communities with  
accurate and relevant data, on-demand.*



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***Data  
sovereignty is  
Tribal  
sovereignty.***



# *Data for future generations.*



NPAIHB



# *Secure ownership and use.*



NPAIHB

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NPAIHB



***Professional  
data and  
analysis you  
can trust.***

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NPAIHB

***Empowering  
Tribes  
through  
community-  
focused  
data.***





NPAIHB



Data collection



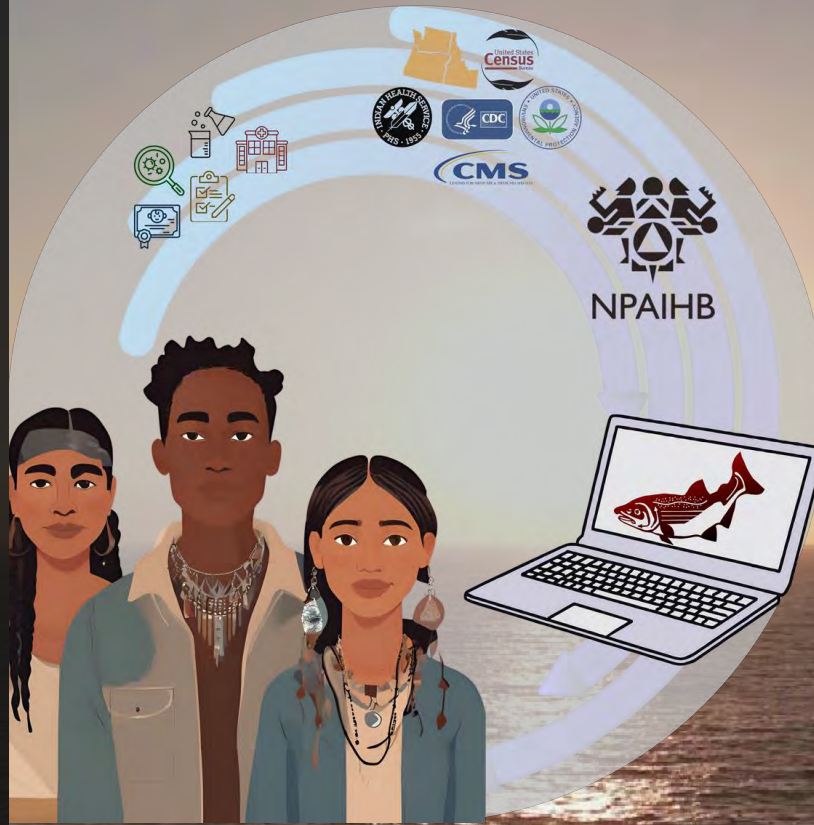
Quality,  
accuracy, and  
completeness



Expert analysis

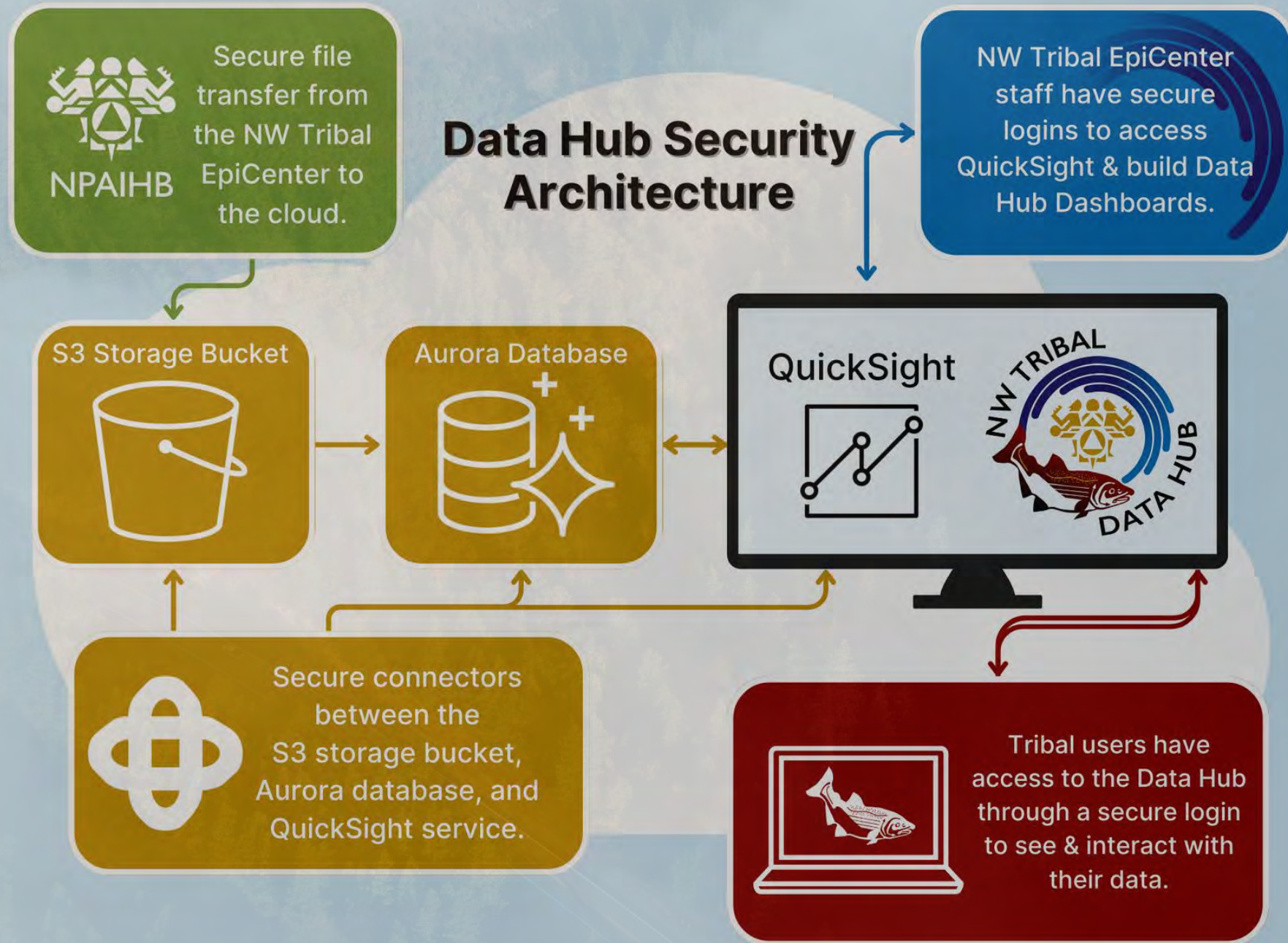


Secure access  
and storage



*How it works....*







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# 2024 Metrics and Goals

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Current  
Data Sharing  
Agreements

04

2025 Goal  
Participating  
Tribes

00

2026 Goal  
Community  
Health  
Profiles



# Access



*“Access to timely, reliable, and identifiable epidemiological data is vital to disease surveillance and other epidemiological functions. These **data are central to decision making**, as they can help AI/AN communities define priorities, develop health improvement strategies, acquire resources, and implement effective interventions.”*

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United States Government Accountability Office



NPAIHB

# Community Voice



***“Anti-racism, equity, justice, and community power must be at the center of any effort to modernize our data systems, including how they are created and operate, what they measure, and whom they benefit. To realize their full potential, data systems must be modernized to become ecosystems—interconnected generators of information that are linked across multiple sectors and agencies, wherein the needs and voices of communities most impacted by structural racism are prioritized.”***

Jamila M. Porter, Brian C. Castrucci, and Jacquelynn Y. Orr



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# Outcomes

- Free, secure access
- Targeted intervention
- Improved programing
- Impact





# NW Tribal Data Hub

## About the NW Tribal Data Hub

The NW Tribal Data Hub provides Tribes in Idaho, Oregon, and Washington with secure, direct, and easy access to public health data on topics such as demographics, cancer, substance use and overdose, hospitalizations, leading cause of death, and other public health issues

## Helpful Links



## Data Hub Login

Login to the Northwest Tribal Data Hub

[Login Here](#)

This link will re-direct you to another site.

## Get Started

### Get Started

- Step 1:** Complete a Data Sharing Agreement and Data Hub Addendum and email to DataHub@npaihb.org. For more information on Data Agreements (npaihb.org).
- Step 2:** Identify who will have access and complete the User Request Form. Submit the form through a Support Request.
- Step 3:** Log into your account using the Data Hub Login.

### Helpful Links

- Tribal Data
- Training Videos
- Health Data
- NW Tribal Data Hub Data Analysis Methods

## Technical Assistance

### Technical Assistance

The NW Tribal Data Hub staff provides Tribes in Idaho, Oregon, and Washington with technical assistance for the use of the NW Tribal Data Hub.

We have accumulated a list of frequently asked questions below. Click the question to expand the answer. If you need assistance you may submit a Support Request.

### Helpful Links

- Tribal Data Hub User Guide
- Training Videos - Coming Soon
- Health Data Literacy Videos
- NW Tribal Data Hub Data Analysis Methods



## Resources

### Training Resources

NW Tribal Data Hub and the NPAIHB provides training resources and technical assistance to Tribes in Idaho, Oregon, and Washington. Here are some training resources.

- [Data Hub User Guide](#)
- [Data Hub Training Videos - Coming Soon!](#)
- [Health Data Literacy Training Videos](#)
- [NW Tribal Data Hub Data Analysis Methods](#)

Additional resources can be found on the Technical Assistance page.

### Other NPAIHB Resources

- NPAIHB
- NWTEC
- IDEA-NW
- Native Data

## Data Sharing Agreement

The Data Sharing Agreement (DSA) between a federally recognized Tribe and the NWTEC provides a foundation for NWTEC to provide technical assistance and data to the Tribe.

### Data Hub Addendum

The Data Hub addendum provides the Tribe with access to the NW Tribal Data Hub, which provides virtual access to regional, state, and Tribal Area-level data.

### Data Exchange Addendum

The Data exchange addendum protects the Tribe's data ownership while sharing data with NWTEC to provide technical support.

### Helpful Links

- Data Sharing Agreement
- User Request Form
- New User

## Frequently Asked Questions (FAQs)

- How does the Data Hub identify the Tribal Area?
- How is the Data Hub updated?
- Can Tribes request additional data be added to their Data Hub Dashboard?
- Why does the Data Hub not include...

## NW Tribal Data Hub Fact Sheets

Fact sheets provide a simple overview of each topic.





NPAIHB

01

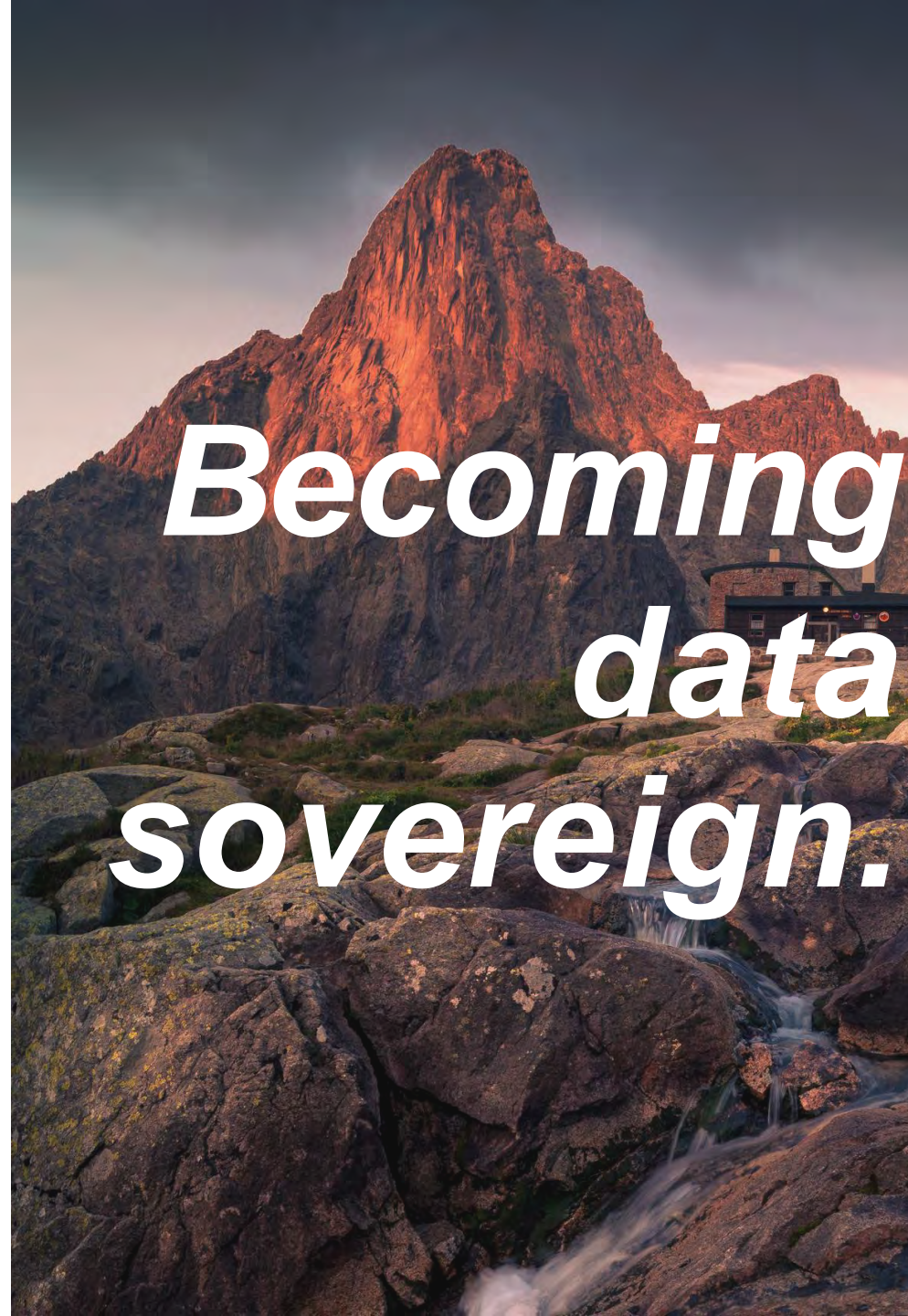
Complete a Data Sharing Agreement (DSA) with Data Hub Addendum.

02

Complete and submit a user request form.

03

Securely access your data.



*Becoming  
data  
sovereign.*





NPAIHB

## Data Sharing Agreement

The Data Sharing Agreement (DSA) between a federally recognized Tribe and the Northwest Tribal Epidemiology Center (NWTEC) provides a foundation for NWTEC to provide technical assistance and data to the Tribe.

### Data Hub Addendum

The Data Hub addendum provides the Tribe with access to the NW Tribal Data Hub to retrieve regional, state, and Tribal Area-level data.



### Data Exchange Addendum

The Data exchange addendum protects the Tribe's data ownership while sharing data with NWTEC to provide technical support.



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# Data Hub Team



Sujata Joshi, MSPH  
IDEA-NW Project Director



Heidi Lovejoy, MSc  
Data Hub Epidemiologist



Meena Patil, MPH, CPH  
Data Hub Epidemiologist



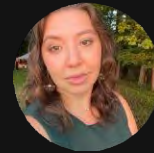
Marches Armstrong, MSIS  
IT Director



Jason Arnold  
Systems Analyst



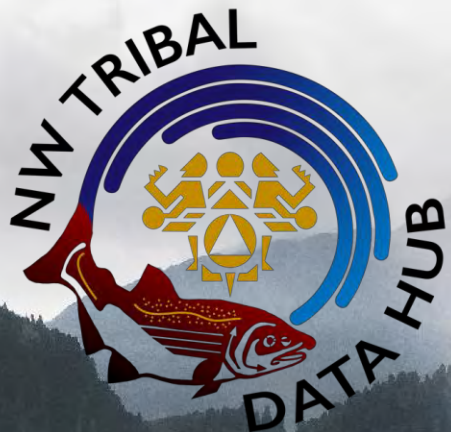
Sunny Stone, MPH, MCHES  
Data Hub Outreach Manager



Pakak Sophie Boerner, BA,  
MA(c)  
Data Hub Intern



Indi Skuzinski, MSDA  
Data Engineer (CDC Forndation)



# Let's work together.

*"The ultimate goal of data modernization should be to **shift power, rectify injustices against communities of color, and ensure communities have the resources and autonomy necessary to advance their own agendas.**"*

Jamila M. Porter, Brian C. Castrucci, and Jacquelynn Y. Orr

## NW Tribal Data Hub

Email: [datahub@npaihb.org](mailto:datahub@npaihb.org)



Data Hub: [DataHub.npaihb.org](https://DataHub.npaihb.org)

NPAIHB: [www.npaihb.org](http://www.npaihb.org)



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# References

Porter, Jamila M., Castrucci, Brian C. and Orr, Jacquelynn Y. **What's Missing from Data Modernization? A Focus on Structural Racism.** Health Equity. 2023, Vol. 7, 1. <https://www.liebertpub.com/doi/full/10.1089/heq.2023.0086>.

United States Government Accountability Office. **Tribal Epidemiology Centers: HHS Actions Needed to Enhance Data Access.** Washington, DC : United States Government Accountability Office, 2022. GAO-22-104698. <https://www.gao.gov/products/gao-22-104698>.

Northwest Portland Area Indian Health Board. NW Tribal Data Hub. [Online] November 2024. <https://datahub.npaihb.org/>.

**DATA SHARING AGREEMENT  
BY AND BETWEEN  
[TRIBE]  
AND  
Northwest Portland Area Indian Health Board’s  
Northwest Tribal Epidemiology Center**

This Data Sharing Agreement (“Agreement”) is made and entered into as of (the “Effective Date”) by and between the [INSERT NAME OF TRIBE] (“TRIBE”), a sovereign Indian Nation, located at [INSERT ADDRESS], and the Northwest Portland Area Indian Health Board (“NPAIHB”), a Public Law 93-638 organization, located at 2121 SW Broadway Ave., Suite 300, Portland, OR 97201 (collectively the “Parties”), the legal contractor for the Northwest Tribal Epidemiology Center (“NWTEC”).

**I. Purpose**

- A. The purpose of this Agreement is to describe how the NPAIHB NWTEC will collect, store, secure, analyze, report, and disclose data to TRIBE for purposes of carrying out activities authorized under 25 U.S.C. § 1621m, this Agreement, Addendum(s) and/or other documents incorporated by reference.
- B. To fulfill its mission and core functions, through this Agreement, the NWTEC will engage in seven core functions under 25 U.S.C. § 1621m, or other functions as determined by the 43 federally-recognized Tribes in Idaho, Oregon, and Washington (“Northwest Tribes”), with tribal, local, state, and federal partners and will carry out these functions under the principles of Tribal Data Sovereignty.

**II. Legal Authorities**

- A. TRIBE is a federally recognized Indian tribe listed on the Department of the Interior’s list under the Federally Recognized Indian Tribe List Act of 1994, 25 U.S.C. § 5131, which the Secretary currently acknowledges as an Indian Tribe, and with which the United States maintains a government-to-government relationship.
- B. NPAIHB a 501(c)(3) non-profit organization incorporated with the State of Oregon and “tribal organization” as defined by the Indian Self-Determination and Education Assistance Act (ISDEAA), Public. Law 93-638, 25 U.S.C. §§ 5301 et seq., serving Northwest Tribes with a mission to eliminate health disparities and improve the quality of life of American Indian and Alaska Natives (AI/AN) by supporting Northwest Tribes in their delivery of culturally appropriate, high quality health programs and services.
- C. NPAIHB is the legal contractor for NWTEC and has authority to enter into this Agreement pursuant to NPAIHB Constitution and By-Laws Article II, Section 5 and

Article XII, Duties, Sections (5) and (7).

- D. NWTEC is a Tribal Epidemiology Center and division of the NPAIHB, founded in 1996 as a core component of the NPAIHB under NPAIHB Resolution No. 1-96-5, "Support for Northwest Tribal Epidemiology Center."
- E. NWTEC is a Public Health Authority as provided under 25 U.S.C § 1621m(e)(1) and as defined at 45 CFR §164.501 under the Health Insurance Portability and Accountability Act (HIPAA).
- F. NWTEC's data acquisition and quality improvement activities have the support of NPAIHB's Board of Delegates under NPAIHB Resolution No. 21-04-03, "Support for NPAIHB NWTEC Access and Record Linkages with Public Health Surveillance Systems in Idaho, Oregon, and Washington."
- G. TRIBE and NPAIHB NWTEC have the authority to enter into this Agreement.

### III. Definitions

- A. Data. "Data" means information obtained from tribal, federal, state, regional and local government sources, Section IV(A), or as described in the Addendums.
- B. HIPAA. "HIPAA" means the Health Insurance Portability and Accountability Act of 1996, 42 U.S.C. §§ 1320d-2 and 1320d-4, and its implementing regulations as may be revised from time to time.
- C. HITECH. "HITECH" means the Health Information Technology for Economic and Clinical Health Act of 2009 and its implementing regulation as may revised from time to time under 42 U.S.C. §§300jj et seq., §§17901 et seq.
- D. "Indian tribe(s)" or "Tribe(s)". "Indian tribe(s)" or "Tribe(s)" is defined under 25 U.S.C. § 2201 and 25 U.S.C. § 5130(2) as any Indian or Alaska Native tribe, band, nation, pueblo, village or community that the Secretary of the Interior acknowledges to exist as an Indian tribe.
- E. Limited Data Set. "Limited Data Set" means potentially identifiable protected health information. A Limited Data Set *may* contain dates of admission and discharge, as well as dates of birth and death; and nine-digit zip code, city, and state information.
- H. NPAIHB. NPAIHB means the Northwest Portland Area Indian Health Board, a 501(c)(3) non-profit organization incorporated with the State of Oregon and "tribal organization" as defined by the Indian Self-Determination and Education Assistance Act (ISDEAA), Public. Law 93-638, 25 U.S.C. §§ 5301 et seq., serving Northwest Tribes with a mission to eliminate health disparities and improve the quality of life of AI/AN by supporting

Northwest Tribes in their delivery of culturally appropriate, high quality health programs and services.

- I. NWTEC. NWTEC means the Northwest Tribal Epidemiology Center, a Tribal Epidemiology Center, and division of the NPAIHB, founded in 1996; a core component of the NPAIHB under NPAIHB Resolution No. 1-96-5, "Support for Northwest Tribal Epidemiology Center;" Public Health Authority as provided under 25 U.S.C § 1621m(e)(1) and as defined at 45 CFR § 164.501 under the Health Insurance Portability and Accountability Act (HIPAA).
- F. Party or Parties. TRIBE and NPAIHB NWTEC are each a Party to this Agreement; and are collectively referred to as "Parties".
- G. Protected Health Information ("PHI"). "Protected Health Information" and the abbreviation "PHI" have the same meaning as the term "protected health information" in 45 C.F.R. § 160.103. PHI includes: (1) names; and (2) postal addresses (may retain city, state, and nine-digit zip code); (3) telephone numbers; (4) FAX numbers; (5) electronic mail addresses; (6) social security numbers; (7) medical record numbers; (8) health plan beneficiary numbers; (9) account numbers; (10) certificate/license numbers; (11) vehicle identifiers and serial numbers, including license plate numbers; (12) device identifiers and serial numbers; (13) web Uniform Resource Locators (URLs); (n) Internet Protocol (IP) address numbers; (14) biometric identifiers, including finger and voice prints; and(15) full face photographic images and/or any comparable images. The term PHI shall include Electronic PHI.
- H. Public Health Authority. "Public Health Authority" as defined under 45 CFR §164.501 means an agency or authority of the United States, a State, a territory, a political subdivision of a State or territory, or an Indian tribe, or a person or entity acting under a grant of authority from or contract with such public agency, including the employees or agents of such public agency or its contractors or persons or entities to whom it has granted authority, that is responsible for public health matters as part of its official mandate.
- I. Tribal Area Data. "Tribal Area Data" is defined as county or zip codes cross-referenced with Indian Health Service Purchased/Referred Care Service Delivery Areas (PRCDA) to identify Tribal Areas. NWTEC references the [PRCDA Table](#) to specify which counties are included in each Tribal PRCDA.
- J. Tribal Data Sovereignty. "Tribal Data Sovereignty" refers to the right of tribes to govern the collection, ownership, and application of their own data.
- K. Tribal Epidemiology Center(s). "Tribal Epidemiology Center(s)" refers to NWTEC or the 12 Tribal Epidemiology Centers established under the 1992 Indian Health Care Improvement Act (IHCIA) that perform seven core functions, including: (i) collecting data and monitoring health; (ii) evaluating data and health care delivery systems; (iii)

identifying health priorities; (iv) making recommendations for health service needs; (v) making recommendations for improving health care delivery systems; (vi) providing epidemiologic and other technical assistance; and (vii) providing disease surveillance under 25 U.S.C. § 1621m(3). Tribal Epidemiology Centers are designated as “Public Health Authorities” under 25 U.S.C § 1621m(e)(1), authorized to access federal, state, regional and local data and data sets, monitoring systems, delivery systems, and other protected health information in service to its member Tribes.

#### **IV. Description of Data**

- A. Data may include tribal, federal, state, and local agency data for AI/AN people in Idaho, Oregon, and Washington, including but not limited to: health determinants and outcomes, demographic information, vital records, hospital and emergency department surveillance and reporting systems, disease registries, notifiable conditions surveillance systems, risk factor surveillance systems, patient encounter data, and on social determinants of health; and include any additional data as described in the Addendum(s).

#### **V. Access to Data**

- A. In General. NWTEC has access to federal, state and tribal data as a Tribal Epidemiology Center and Public Health Authority.
- B. Authorization and Use. TRIBE supports NWTEC access to TRIBE's Data to carry out its core functions as a Tribal Epidemiology Center and Public Health Authority, and for the purposes set forth in this Agreement, including Addendum(s) or other documents incorporated by reference.

#### **VI. Confidentiality and Security**

- A. Confidentiality. NWTEC shall keep all Data and/or information obtained under this Agreement, confidential, in compliance with all applicable federal, state and tribal laws, and the terms of this Agreement.
- B. Access to Confidential Information. NWTEC shall not provide confidential information obtained under this Agreement to any other tribe, tribal organization, person, or entity, and shall not publish any such information, except as explicitly allowed in this Agreement. NWTEC staff may not disclose TRIBE's Data or Tribal Area Data, in whole or in part, without the written authorization from TRIBE's representative as identified in Exhibit 1, (unless required by law).
- C. Security. NWTEC shall implement security measures to protect the Data obtained under this Agreement. Security measures shall be no less stringent than those required by the Security Standards promulgated pursuant to HIPAA (45 CFR §160 and §164). NWTEC will ensure that information used, stored, or transmitted is protected commensurate with the risk and magnitude of the harm that could result from the unauthorized access, use, disclosure, disruption, modification, or destruction of the information.

- D. Safeguards. NWTEC shall implement all reasonable and appropriate administrative, physical, and technological safeguards to prevent use or disclosure of the Data other than as provided for by this Agreement. Further, NWTEC shall implement all administrative, physical, and technical safeguards that reasonably and appropriately protect the confidentiality, integrity, and availability of Data that NWTEC receives, maintains, or transmits.
- E. Data Security. NWTEC agrees to store Data in a restricted area that is accessible only to individuals authorized pursuant to this Agreement. Electronic Data shall be restricted to NWTEC staff and authorized subcontractors.
- F. Secure Access. All NWTEC staff members and authorized subcontractors who will have access to Data must only access electronic Data using appropriate security measures such as a password-protected data security system or least privilege access and will sign the NWTEC confidentiality statement. NWTEC servers and firewalls are configured to allow Audit Logs only to the absolute minimum level of access. All unnecessary users, protocols, and ports are disabled and monitored. The NWTEC database and backups can only be accessed through trusted and secure authentication. NWTEC agrees to meet and/or exceed industry standards in terms of security measures.
- G. Certification in Research Ethics. All NWTEC staff with access to Data will be certified in information security and research ethics, including the Health Insurance Portability and Accountability Act (HIPAA) Privacy Rule Overview training and the Collaborative Institutional Training Initiative (CITI) human subjects protection (or comparable) training.

**VII. Payment**

- A. No compensation will be required by either Party under this Agreement unless outlined in an Addendum(s) for specific projects.

**VIII. Tribal Data Sovereignty**

- A. NWTEC is committed to and honors Tribal Data Sovereignty in its work with TRIBE and all Northwest Tribes.
- B. All data provided by the TRIBE to NWTEC belongs to the TRIBE. NWTEC does not have any rights to this Data and solely stewards Data to support TRIBE's programs in the advancement of TRIBE's health priorities and/or to support Northwest Tribes' health priorities.

**IX. Terms of Agreement**

- A. The Parties' intention upon entering into this Agreement is that it is perpetual. As long as this Agreement remains effective, the Parties agree to review the Agreement upon written request of either Party after its execution. TRIBE may terminate Agreement at any time pursuant to Section XI.



**X. Addendums**

A. NWTEC will work with the TRIBE to complete and update any Addendum(s) to this Agreement that specify the terms, conditions, and requirements for specific Data, or public health data related projects.

**XI. Termination**

A. Either Party may terminate this Agreement in its entirety, or scope of work in an Addendum, for any reason upon thirty (30) days prior written notification to the other Party. This Agreement may be amended by mutual agreement of the Parties.

**XII. Sovereign Immunity**

A. Nothing in this Agreement shall be construed as affecting or otherwise interfering with TRIBE's sovereign immunity or sovereign status of TRIBE.

**XIII. Severability**

A. If any provision of this Agreement, Addendum(s), or any provision of any document incorporated by reference shall be held invalid, such invalidity shall not affect the other provisions of this Agreement which can be given effect without the invalid provision, if such remainder conforms to the requirement of applicable law and the fundamental purpose of this Agreement, and to this end the provisions of this Agreement are declared to be severable.

**XIV. Waiver of Default**

A. This Agreement, or any term or condition, may be modified only by a written amendment signed by the TRIBE and NPAIHB NWTEC, and attached to the original Agreement. Either Party may propose an amendment.

B. Failure or delay on the part of either Party to exercise any right, power, privilege, or remedy provided under this Agreement shall not constitute a waiver. No provision of this Agreement may be waived by either Party except in writing signed by the TRIBE or NPAIHB NWTEC.

C. Waiver of a breach of any provision of the Agreement shall not be deemed to be a waiver of any other or subsequent breach and shall not be construed to be a modification of the terms of the Agreement.

**XV. Notices**

A. Notices shall be sent to the following contact offices and persons under this Agreement:

**For the [TRIBE]:**

Name, Title  
Name of Tribe  
Address

**For NPAIHB NWTEC:**

Laura Platero, Executive Director  
Northwest Portland Area Indian Health Board  
2121 SW Broadway, Suite 300  
Portland, OR 97201

**With a copy to:**

Victoria Warren-Mears, Director  
NPAIHB Northwest Tribal Epidemiology Center  
2121 SW Broadway, Suite 300  
Portland, OR 97201

**XVI. All Writings Contained Herein**

A. This Agreement contains all the terms and conditions agreed upon by the parties. No other understandings, oral or otherwise, regarding the subject matter of this Agreement shall be deemed to exist or to bind any of the parties hereto.

**XVII. Effective Date**

A. This Agreement shall become effective when both the [TRIBE] and NPAIHB NWTEC have adopted the necessary implementing resolutions, and all parties have executed this Agreement and shall remain so as long as both the implementing resolutions remain effective.

**IN WITNESS WHEREOF, the parties have executed this Agreement as of the date of the last signature below.**

[NAME OF TRIBE]

Northwest Portland Area Indian Health Board  
Northwest Tribal Epidemiology Center

DESIGNEE, Designee Title

Laura Platero, Executive Director

Date

Date

Exhibit 1: Tribe's Authorizing Official

The [INSERT TRIBE's name] ("TRIBE") hereby designates the following to authorize Data access for the TRIBE:

<b>TRIBE's Authorizing Official</b>	
Name:	
Title:	
Phone Number:	
Email:	

<b>TRIBE's Authorizing Official Alternate</b>	
Name:	
Title:	
Phone Number:	
Email:	

<b>TRIBE's Point of Contact</b>	
Name:	
Title:	
Phone Number:	
Email:	

The Tribal Authorizing Official is responsible for ensuring Data is accessed and utilized in accordance with the terms of this Agreement, Addendums, or other documents incorporated by reference.

The above table(s) will be updated when there are changes to the Tribal Authorizing Official(s).

**ADDENDUM A**  
**The Northwest Tribal Data Hub**

**I. Purpose**

- A. This Addendum A to the Agreement facilitates TRIBE's access to the Northwest Tribal Data Hub ("hereinafter referred to as Data Hub").
- B. The Data Hub, was developed and is operated by the NWTEC, is a virtual epidemiology database, to provide Northwest Tribes access to regional, state, and community-level public health data, to build capacity within Tribes to utilize their own data and data analysis tools for public health planning and action, and to modernize the NWTEC's data infrastructure.

**II. Tribal Access to NPAIHB Data Hub**

**A. Tribe's Authorizing Official's Responsibilities**

The TRIBE's Authorizing Official designated in the Agreement is responsible for designating Authorized Users who can access Tribal Area-specific data in the Data Hub and providing the NWTEC with updates to the TRIBE's Authorized Users as necessary. The Authorizing Official can designate Authorized Users using the Data Hub New User Request Form. The Authorizing Official will ensure that Authorized Users access and utilize the Data Hub under this Agreement and Addendum A.

**B. Authorized Users' Access and Responsibilities**

The Authorized Users designated by the TRIBE's Authorizing Official have authorization to access the Data Hub subject to the terms of this Agreement. The NWTEC will facilitate such access by assigning credentials to access the Data Hub, providing resources and training on using the Data Hub, and responding to requests for training and technical assistance related to the Data Hub. Authorized Users will be subject to the attached Authorized User Access and User Responsibilities Terms (Exhibit A.1).

**III. Description of the Data**

- A. The TRIBE will have access through the Data Hub to dashboards containing aggregated Data specific to their tribal area and comparison Data for their state and/or region.
- B. The Data will be aggregated by time, geography, and demographic variables to reduce the possibility of identifying individuals and to ensure statistical stability. In certain cases, NWTEC may not be able to release data when numerator cell sizes are less than five (5) or are below the data release thresholds specified in data-sharing agreements with state and/or federal data sources.

**IV. Point of Contact**

The Authorizing Official identified in the Agreement will serve as the contact person for the TRIBE to address issues related to this Addendum. The contact positions for NWTEC related to this Addendum are:

For questions for grievances related to this agreement:

NWTEC Director  
[datahub@npaihb.org](mailto:datahub@npaihb.org)

For technical assistance and onboarding support for the Data Hub:

Data Hub Outreach Manager  
[datahub@npaihb.org](mailto:datahub@npaihb.org)

**IN WITNESS WHEREOF, the parties have executed this Agreement as of the date of the last signature below.**

**[NAME OF TRIBE]**

Northwest Tribal Epidemiology Center  
Northwest Portland Area Indian Health Board

**DESIGNEE, DESIGNEE TITLE**

\_\_\_\_\_  
Laura Platero, Executive Director

**Date**

\_\_\_\_\_  
Date

## **Exhibit A.1: Authorized User Access and User Responsibilities Terms**

All Authorized Data Hub Users are subject to the following terms and conditions for Northwest Portland Area Indian Health Board (NPAIHB), Northwest Tribal Epidemiology Center (NWTEC), Northwest Tribal Data Hub:

These terms and conditions ("Terms") govern TRIBE's authorized users (also referred to as "you") use of the Northwest Tribal Data Hub application (the "App"), operated by NPAIHB (also referred to as "we", "our", or "us") on behalf of NPAIHB's member Tribes.

By using the App, you agree to these Terms. If you do not agree to these Terms, please do not use the App.

1. Acceptance of Terms
  - a. By accessing or using the App, you agree to be bound by these Terms and our Privacy Policy.
2. Eligibility
  - a. Before receiving access to the App, the TRIBE and NPAIHB will complete a Data Sharing Agreement (Agreement). The Tribal Data Hub was developed for Northwest Tribes and TRIBE's use.
  - b. Individual logins will be provided upon completion of the Agreement and approval of user request forms by the TRIBE's Authorizing Official.
3. User Accounts
  - a. You will request a user account to access the App. You are responsible for maintaining the confidentiality of your account information.
4. Use of Data
  - a. The Tribal Data Hub was developed to allow TRIBE's authorized users to access and utilize community-level Data on their communities. The Data included in the Data Hub are not to be used to identify individuals for any purpose.
5. Privacy
  - a. Data accessed in the Tribal Data Hub is property of the TRIBE and agencies providing Data to NPAIHB.
  - b. Data provided through the Tribal Data Hub is subject to federal, state, or tribal laws, as applicable, that protect confidential information from public disclosure.
  - c. Use of the App and data is governed by the Agreement and NPAIHB and NWTEC policy.
  - d. The Tribal Data Hub was designed to allow TRIBE's Users to access and utilize Data. You will have the ability to print and download the TRIBE's data. As a TRIBE's authorized user, it is your responsibility to understand and follow your TRIBE's policy and procedure for data storage and sharing.
  - e. Logins are for **individual use only by TRIBE's authorized users**. Do not share login information with other non-authorized individuals at the TRIBE. If additional individuals need access, please complete the Data Hub User Request Form to request a new user account.

- f. You will notify the Tribal Data Hub team as soon as possible if there is a change in status or employment to ensure user access is removed in a timely fashion to prevent unauthorized access to your TRIBE's data.
6. User Content
  - a. You may have the opportunity to submit content, such as TRIBE's data. The content submitted will be governed by the Agreement.
7. Prohibited Activities
  - a. You agree not to:
    - i. Use the App for any unlawful purpose.
    - ii. Attempt to identify individuals represented in the data or data sources included in the Data Hub.
    - iii. Post, transmit, or share any content that violates applicable laws or infringes upon third-party rights.
    - iv. Attempt to interfere with the proper functioning of the App.
8. In-app Monitoring
  - a. As a TRIBE's authorized user, you understand and acknowledge that your use of the app may be monitored by NPAIHB for system management and to ensure protection against unauthorized access or use.
9. Termination
  - a. NPAIHB, the TRIBE's Authorizing Official, or TRIBE reserves the right to terminate or suspend your access to the App.
  - b. Unauthorized use of the App may result in immediate termination of an account.
10. Intellectual Property
  - i. All content and materials available on the App, including but not limited to text, graphics, logos, images, and software, are maintained by NPAIHB or its licensors and are protected by intellectual property laws.
  - ii. All inventions, technological improvements, and educational or professional materials are the property of NPAIHB (unless they have been designated as belonging to another entity through written Agreement).
11. Disclaimers
  - a. The App is provided on an "as-is" and "as-available" basis. We make no warranties, express or implied, regarding the App's accuracy, reliability, or fitness for a particular purpose.
12. Limitation of Liability
  - a. To the fullest extent permitted by law, we shall not be liable for any direct, indirect, incidental, special, consequential, or punitive damages.
13. Changes to Terms
  - a. We reserve the right to update or modify these Terms at any time. We will notify you of any changes via the App or through other means.
14. Governing Law
  - a. These Terms are governed by the laws as identified in the Agreement and by other state and federal laws governing the disclosure and release of data, without regard to conflict of law principles.

- b. Unauthorized use or disclosure of confidential Data provided through the Tribal Data Hub will result in immediate closure of your user account. You may also be subject to administrative, civil, and criminal penalties identified in law.
- 15. Contact Information
  - a. If you have any questions or concerns about these Terms, please contact us at [DataHub@npaihb.org](mailto:DataHub@npaihb.org).

By using the App, you acknowledge that you have read, understood, and agree to these Terms and our Privacy Policy.



**ADDENDUM B**  
**The Northwest Tribal General Data Exchange for [Project]**

**I. Purpose**

- A. The purpose of this Addendum B to Agreement is to establish the NWTEC roles and responsibilities in assisting the TRIBE for the [Insert Project Name] for the purpose [Insert purpose of project].

**II. Term and Effective Date**

- A. This Addendum B will become effective upon signing by both Parties and will continue until [Insert term of project. This can be a timeframe or a milestone that denotes the completion of the project]. Either Party may terminate this Agreement, for any reason upon thirty (30) days prior written notification to the other Party.

**III. Description of Data and Data Workplan**

- A. TRIBE will provide the NWTEC with the following Data: [Insert description of the data that will be provided]
- B. The NWTEC will provide the following services and outputs to the TRIBE. [Describe how the NWTEC will analyze, report, otherwise use, and return/destroy the data]

**IV. Ownership of data**

- A. TRIBE, as a sovereign nation and Public Health Authority, will retain full ownership of any Data provided and any data products produced under Addendum B.

[Additional Response Text: Whenever TRIBE-specific Data are reported with tribal approval, TRIBE shall be cited as the source of the Data in all tables, reports, presentations, and scientific papers, and the NWTEC shall be cited as the source of interpretations, calculations, and/or manipulations of the Data. The NWTEC may use, reuse and analyze, for teaching and research purposes, the Data and findings as reviewed by and approved by TRIBE.]

- B. The NWTEC agrees to provide copies of any research papers or reports prepared as a result of access to TRIBE's Data under this Agreement, and to allow TRIBE to reprint or distribute same without charge, to the extent permitted under copyright protection laws and any applicable agreements as to copyright or related intellectual property rights.

**V. Access to Data**

**A. Method of Access and Transfer**

The Data described in Section III(A) will be provided by [describe transfer method].

**B. Tribe's Authorizing Official's Responsibilities**

The TRIBE's Authorizing Official designated in the Agreement is responsible for designating Authorized Users who can access Tribal Area-specific Data under this Addendum B and providing the NWTEC with updates to the TRIBE's Authorized Users as necessary. The TRIBE's Authorizing Official will ensure that Authorized Users access and utilize Data in accordance with this Agreement and Addendum B.

**C. Frequency of Data Exchange**

NWTEC will exchange Data [Describe frequency of data exchange. For example, as needed to analyze and report on the data for project title]

**VI. Payment**

A. Compensation for this project will be made by check in the amount of \$X and paid no later than (Month Date, Year). [Describe if any payment will be required under this agreement]

**VII. Point of Contacts**

A. The TRIBE's Authorizing Official identified in the Agreement will serve as the contact person for the TRIBE to address issues related to this Addendum B. The contact positions for NWTEC related to this Agreement are:

For questions for grievances related to this Agreement:  
NWTEC Director at [datahub@npaihb.org](mailto:datahub@npaihb.org)

**IN WITNESS WHEREOF, the parties have executed this Agreement.**

[NAME OF TRIBE]

Northwest Tribal Epidemiology Center  
Northwest Portland Area Indian Health Board

DESIGNEE, Designee Title

Laura Platero, Executive Director

Date

Date

# Portland Area IHS Update

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GENIEL HARRISON, MD  
CHIEF MEDICAL OFFICER  
OFFICE, PORTLAND AREA IHS  
JANUARY , 2024



# Topics for Today

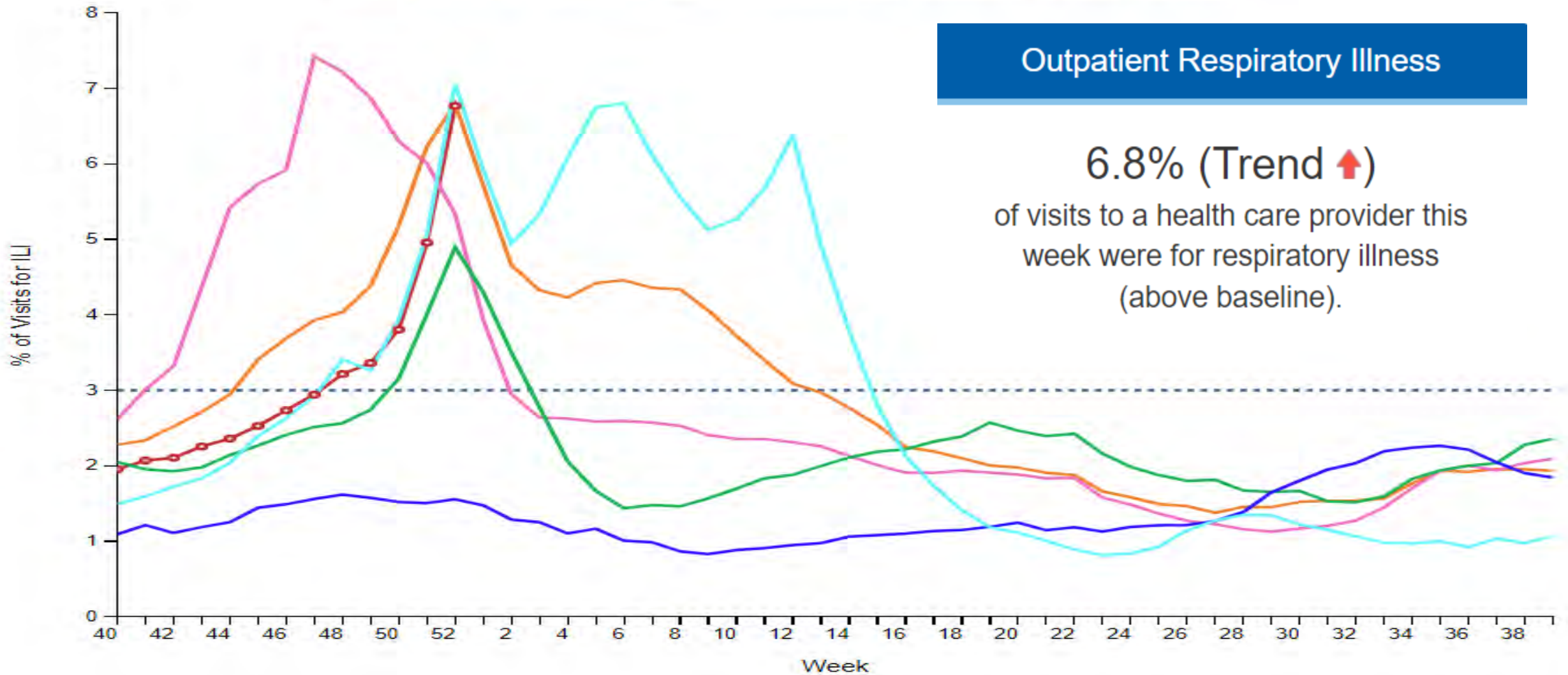
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## Current Situation Report –

- Outpatient ILI Activity
- Influenza
- COVID-19
- RSV

Season: 2024-25 and 5 previous seasons ▾

Percentage of Outpatient Visits for Respiratory Illness Reported by The U.S. Outpatient Influenza-like Illness Surveillance Network (ILINet), Weekly National Summary, 2024-25 Season and Selected Previous Seasons

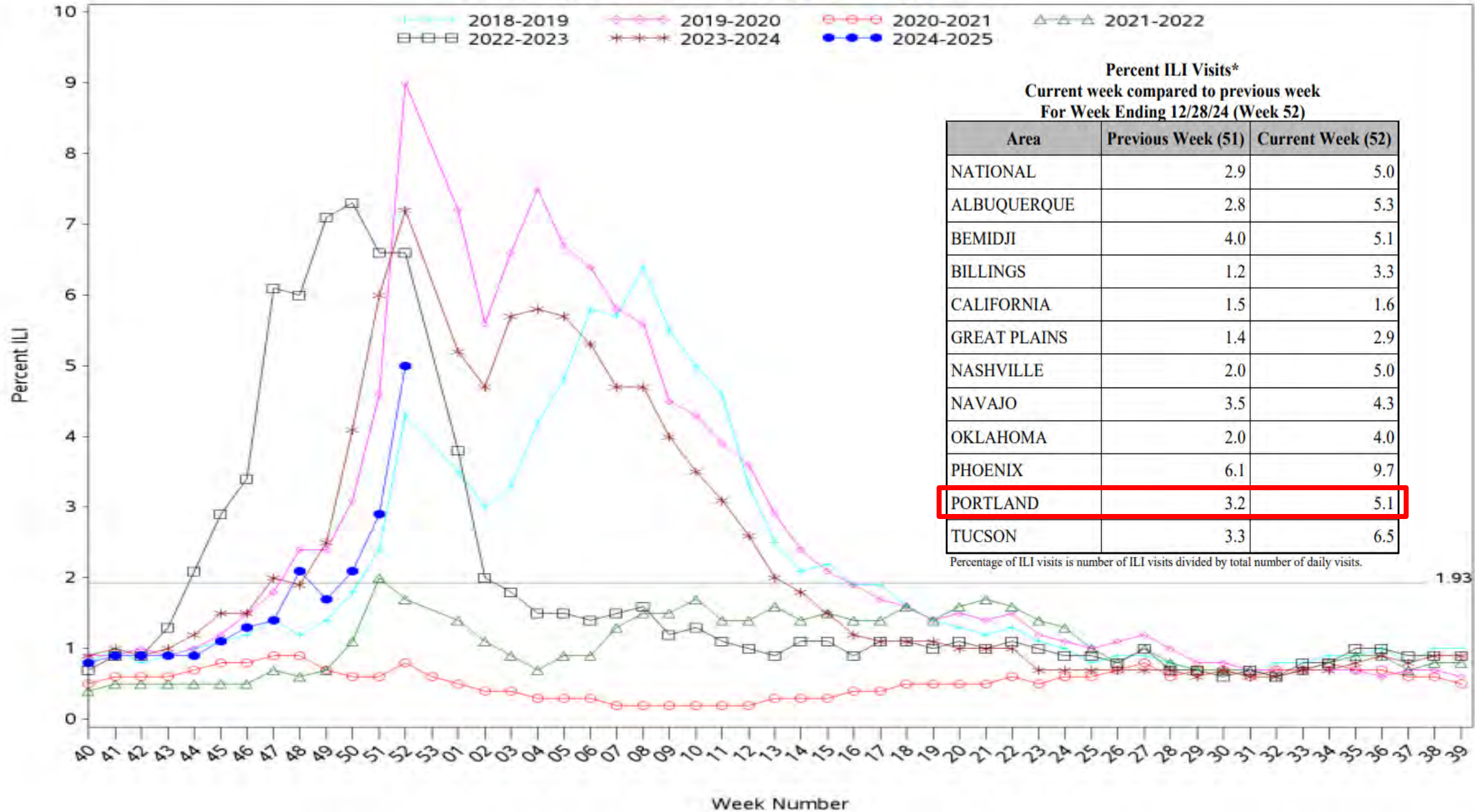


- 2024-25 National Baseline
- 2024-25 Season
- 2023-24 Season
- 2022-23 Season
- 2021-22 Season
- 2020-21 Season
- 2019-20 Season

# All Reporting IHS Areas

## Influenza-Like Illness (ILI) for Current Surveillance Year and Previous Six Surveillance Years

### Percentage of Visits for ILI Visits per Week



**Percent ILI Visits\***  
Current week compared to previous week  
For Week Ending 12/28/24 (Week 52)

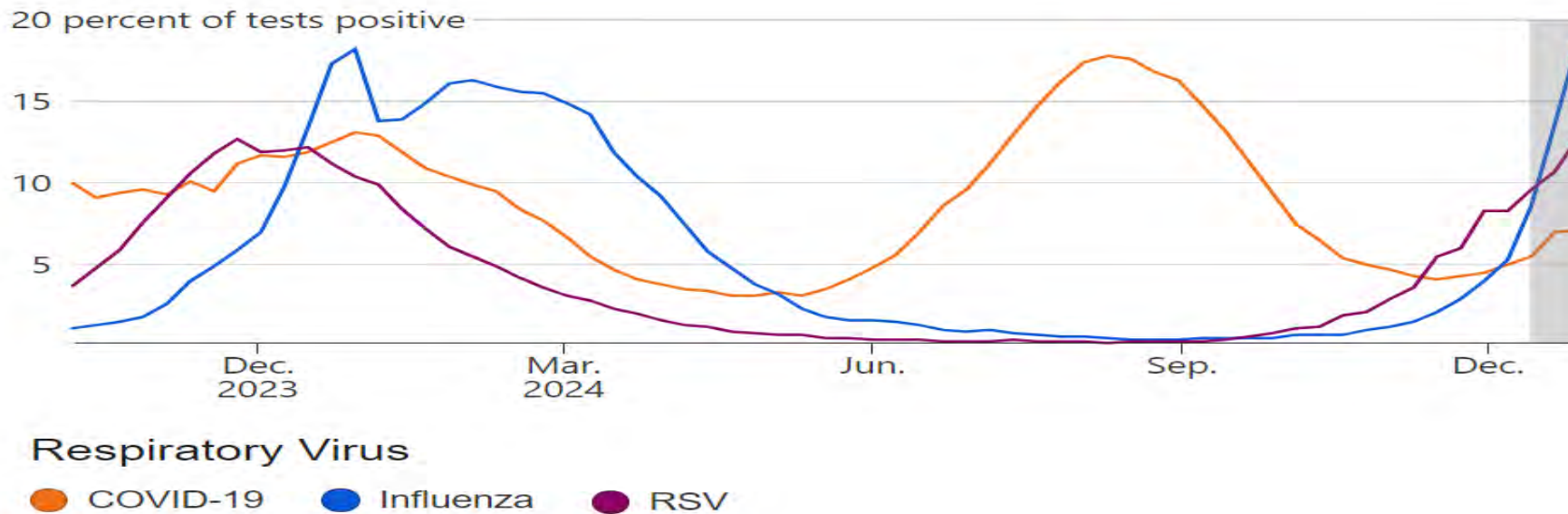
Area	Previous Week (51)	Current Week (52)
NATIONAL	2.9	5.0
ALBUQUERQUE	2.8	5.3
BEMIDJI	4.0	5.1
BILLINGS	1.2	3.3
CALIFORNIA	1.5	1.6
GREAT PLAINS	1.4	2.9
NASHVILLE	2.0	5.0
NAVAJO	3.5	4.3
OKLAHOMA	2.0	4.0
PHOENIX	6.1	9.7
<b>PORTLAND</b>	<b>3.2</b>	<b>5.1</b>
TUCSON	3.3	6.5

\*Percentage of ILI visits is number of ILI visits divided by total number of daily visits.

# Respiratory Viruses

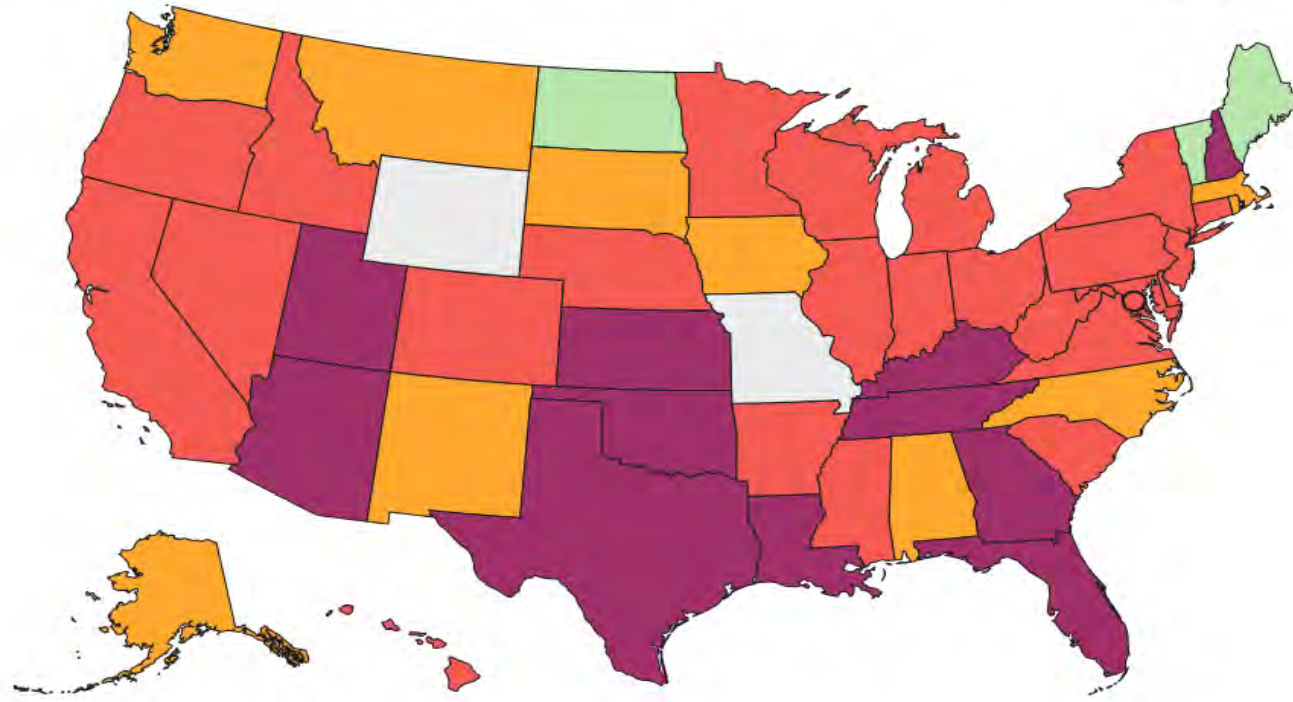
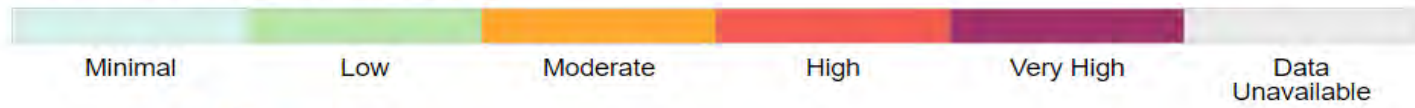
## Percent of Tests Positive for Respiratory Viruses

Weekly percent of tests positive for the viruses that cause COVID-19, influenza, and RSV at the national level. Preliminary data are shaded in gray. Refer to [data notes](#) for more details.



# Respiratory Viruses

Acute Respiratory Illness

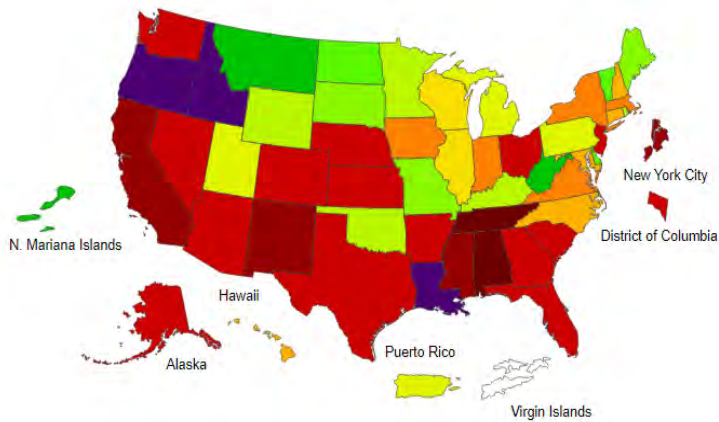




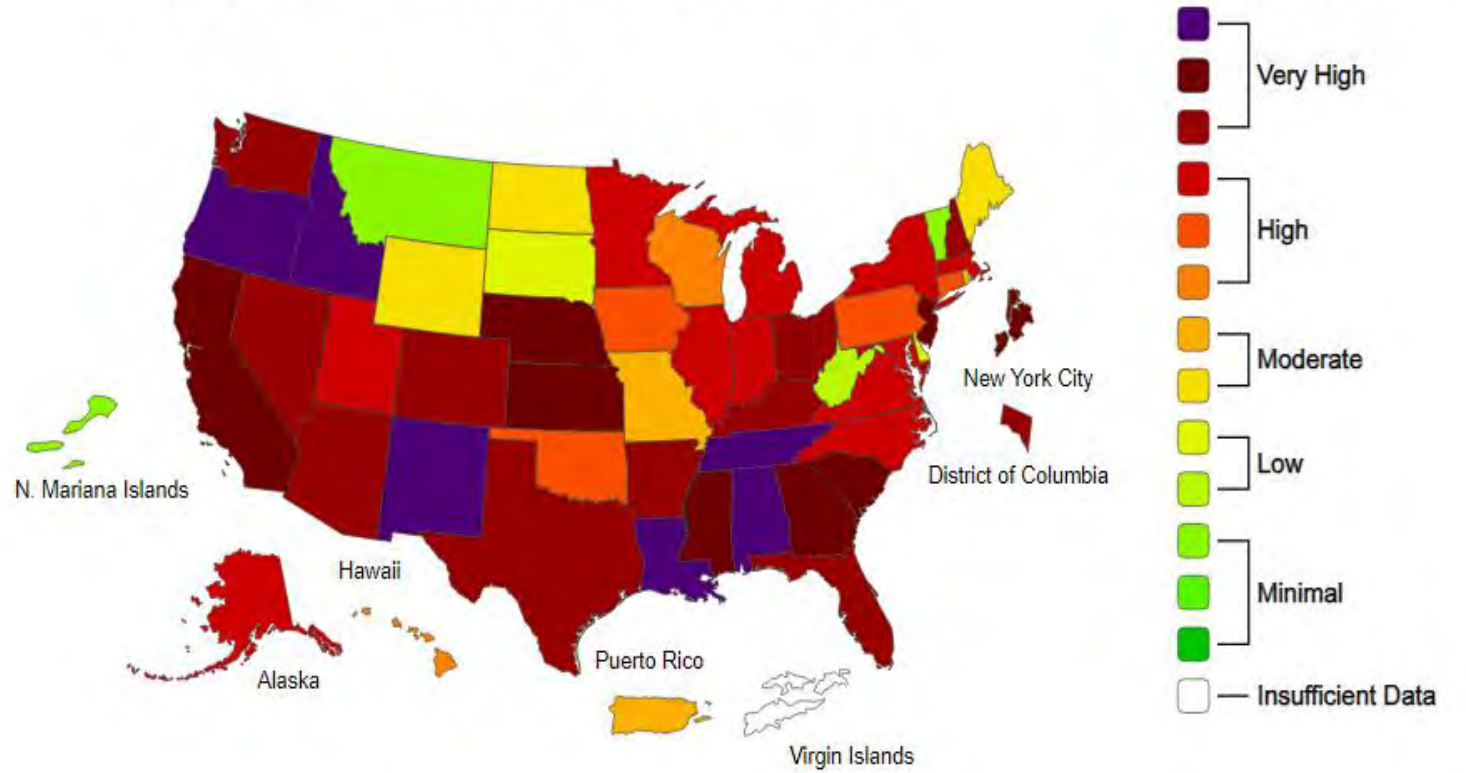
# Influenza 2024-25

Week 51

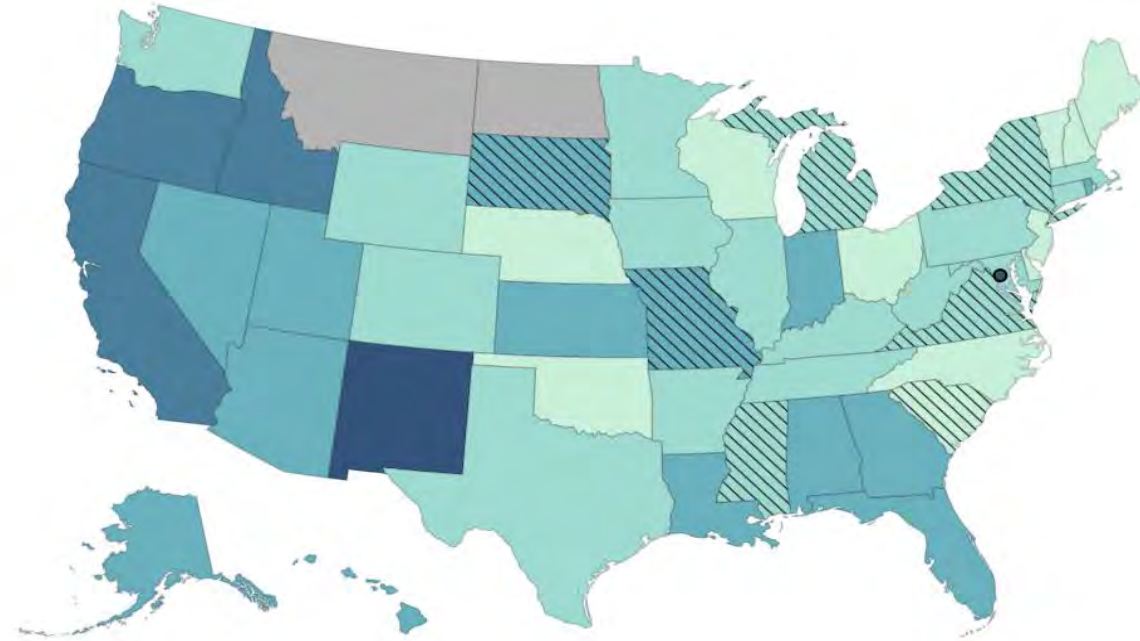
2024-25 Influenza Season Week 51 ending Dec 21, 2024



2024-25 Influenza Season Week 52 ending Dec 28, 2024



# Influenza A Wastewater Viral Activity



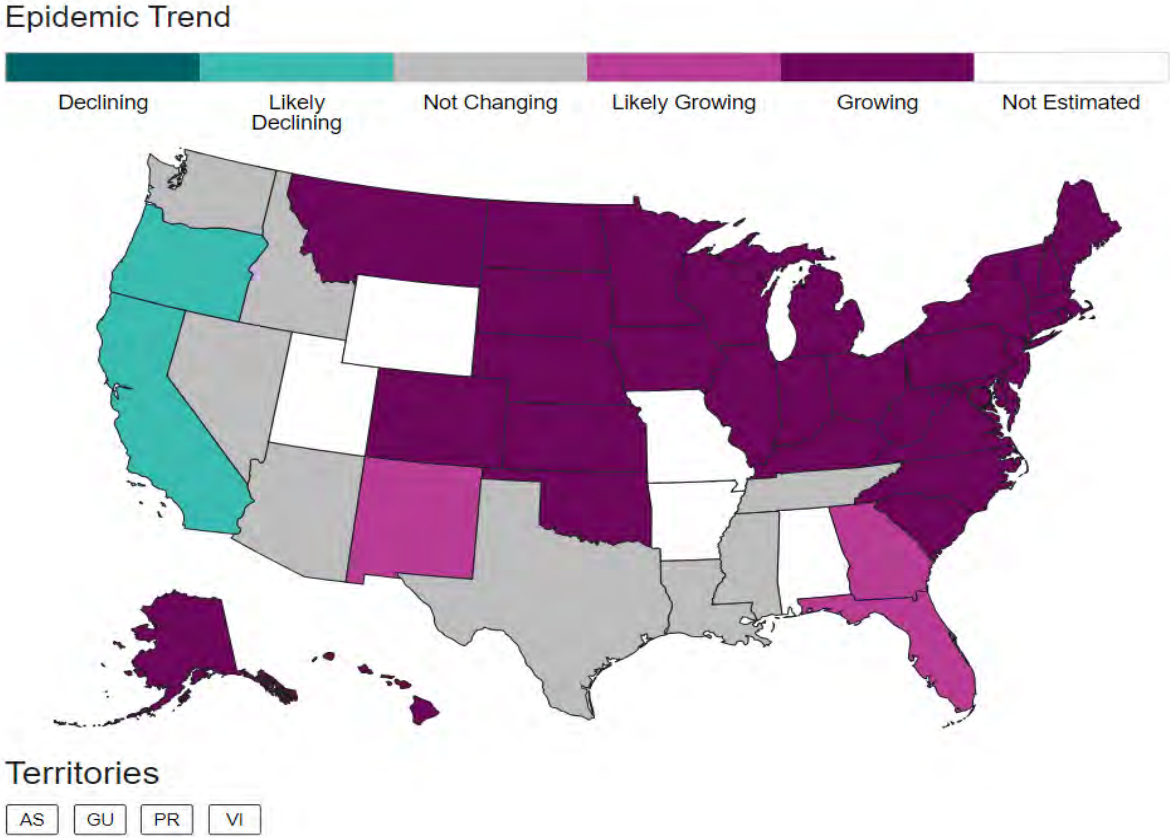
Territories **GU** **VI**

### Influenza A Wastewater Viral Activity Levels

Select a level to add or remove from map.

- Very High
- High
- Moderate
- Low
- Minimal
- No Data
- \*Limited Coverage

# Influenza Epidemic Trends



Data last updated on December 31, 2024 and presented through December 31, 2024.

# COVID-19 Update in the US

## COVID-19 Update for the United States

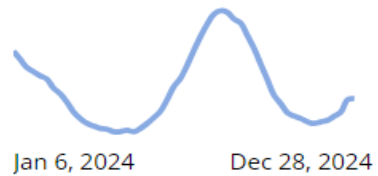
### Early Indicators

#### Test Positivity >

% Test Positivity

**7.1%**

Week ending December 28, 2024  
Previous week 7%

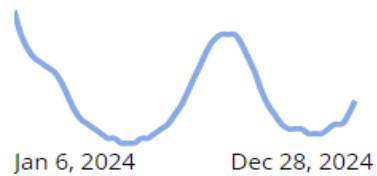


#### Emergency Department Visits >

% Diagnosed as COVID-19

**1.2%**

Week ending December 28, 2024  
Previous week 0.9%



These early indicators represent a portion of national COVID-19 tests and emergency department visits. [Wastewater](#) information also provides early indicators of spread.

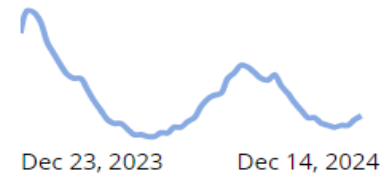
### Severity Indicators

#### Hospitalizations >

Rate per 100,000 population

**2.2**

Week ending December 14, 2024  
Previous week 2.0

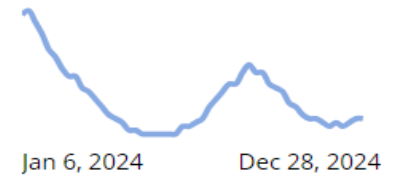


#### Deaths >

% of All Deaths in U.S. Due to COVID-19

**1.0%**

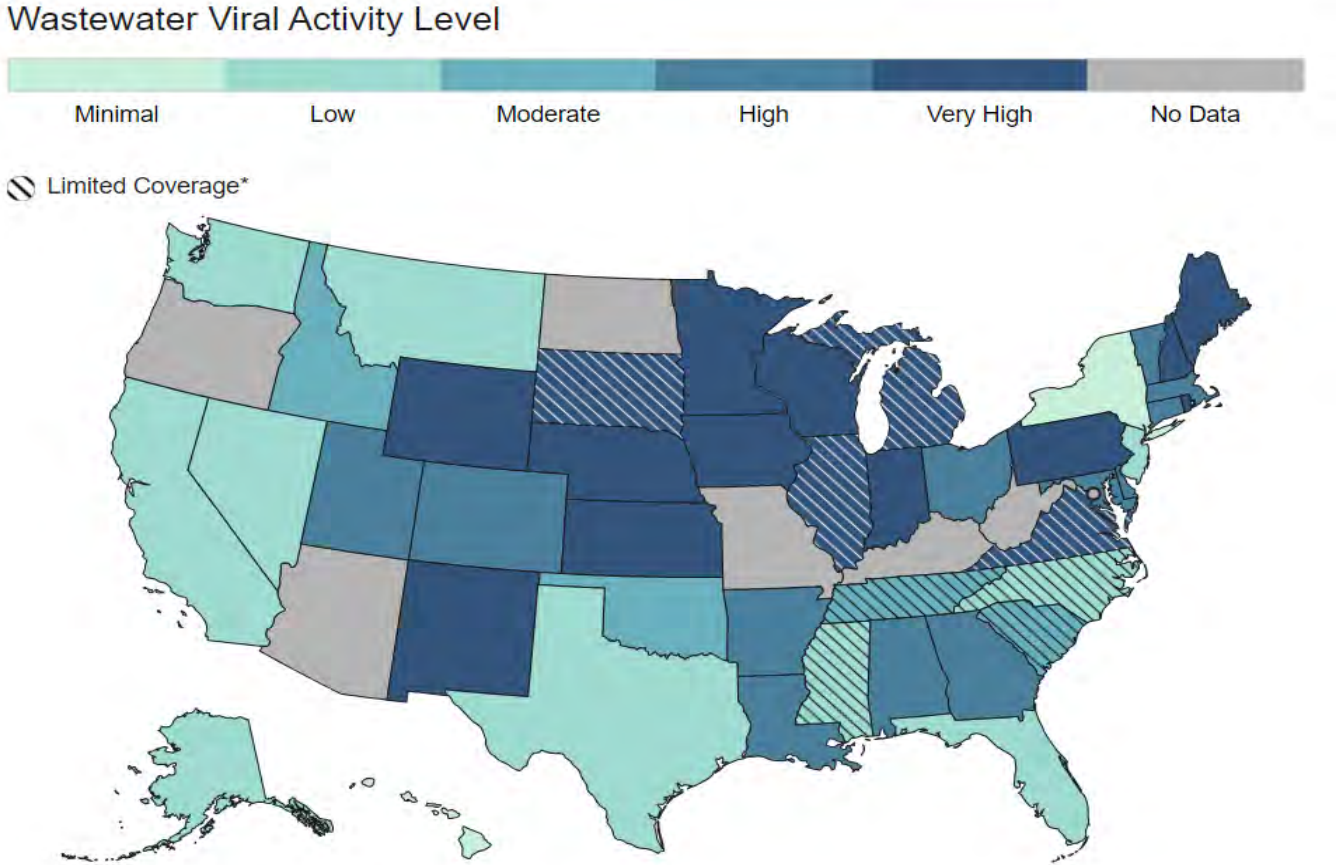
Week ending December 28, 2024  
Previous week 1%



CDC | Test Positivity data through: December 28, 2024; Emergency Department Visit data through: December 28, 2024; Hospitalization data through: December 14, 2024; Death data through: December 28, 2024.

Posted: January 6, 2025 3:21 PM ET

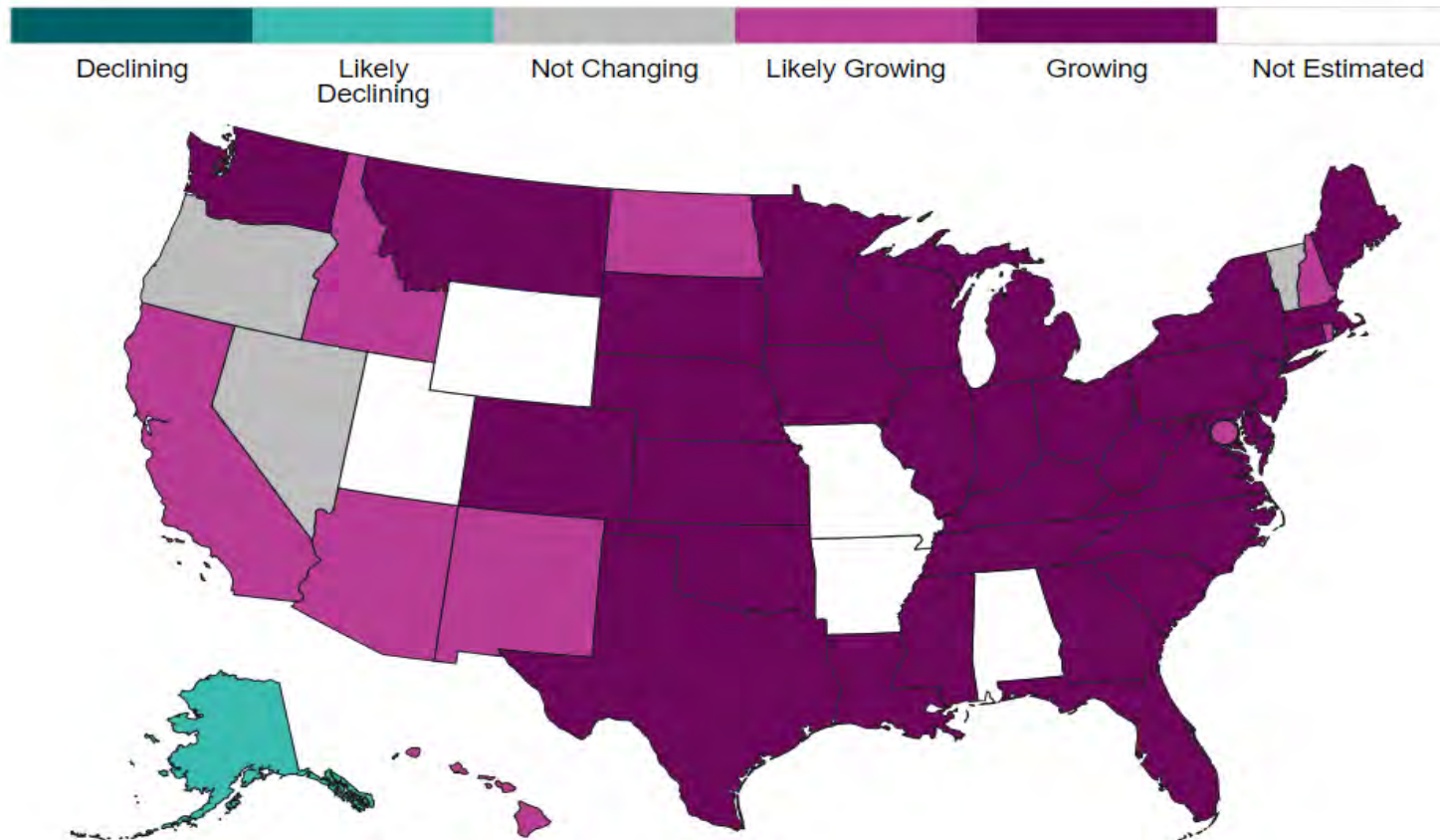
# COVID Wastewater Viral Activity Level



# COVID Epidemic Trends

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Epidemic Trend



# Variants

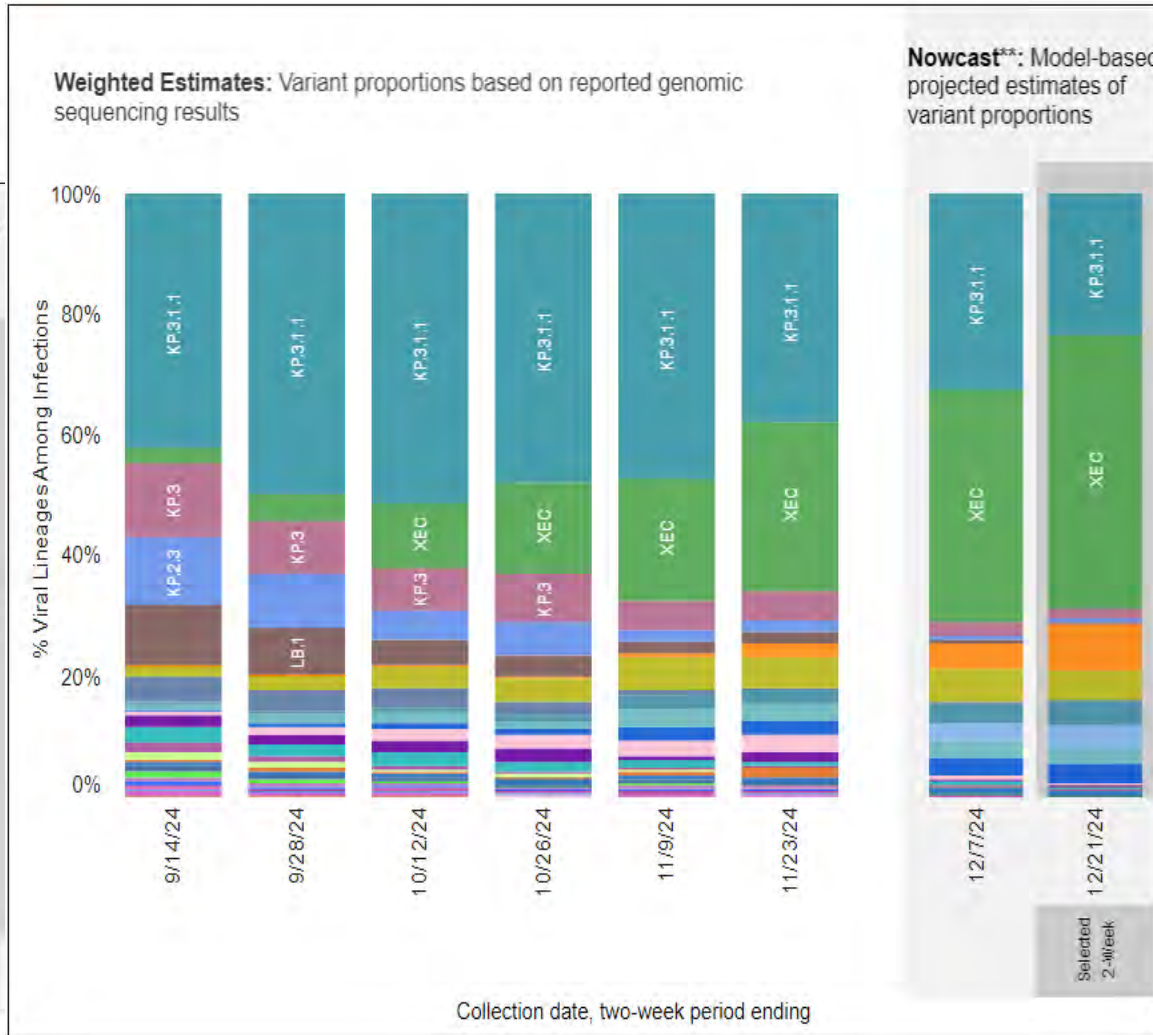
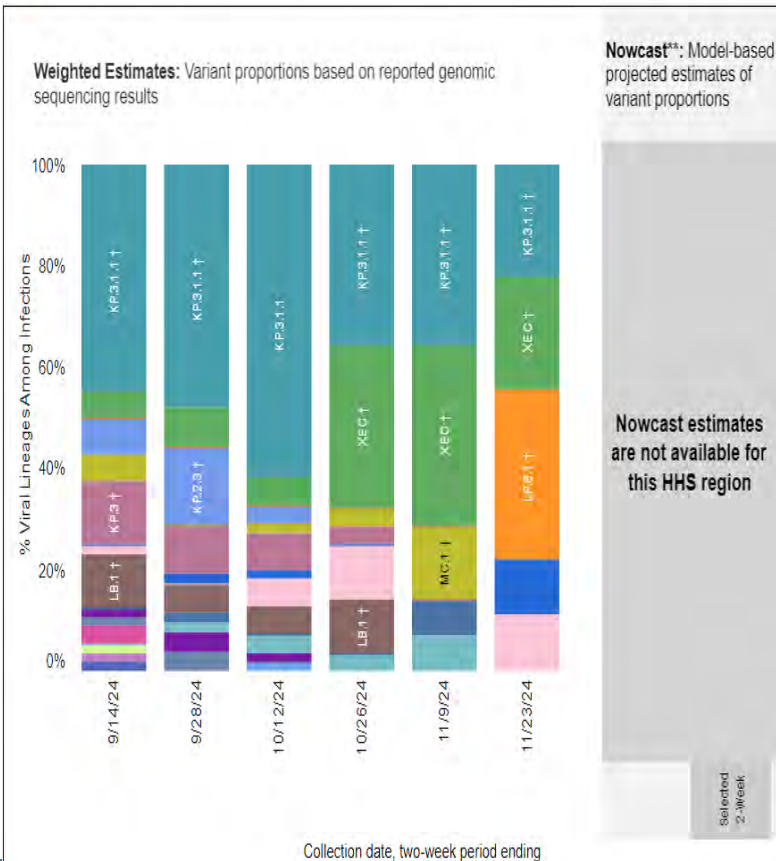
## Weighted and Nowcast Estimates in United States for 2-Week Periods in 9/1/2024 – 12/21/2024

## Nowcast Estimates in United States for 12/8/2024 – 12/21/2024

Hover over (or tap in mobile) any lineage of interest to see the amount of uncertainty in that lineage's estimate.

### Weighted Estimates in HHS Region 10 for 2-Week Periods in 9/1/2024 – 12/21/2024

Hover over (or tap in mobile) any lineage of interest to see the amount of uncertainty in that lineage's estimate.



USA			
WHO label	Lineage #	%Total	95%PI
Omicron	XEC	45%	40–51%
	KP3.1.1	24%	21–27%
	LP.8.1	8%	3–17%
	MC.1	5%	4–7%
	LF.7	4%	2–7%
	XEK	4%	2–6%
	MC.10.1	3%	1–7%
	LB.1.3.1	2%	1–5%
	KP.3	2%	1–4%
	MC.19	1%	0–1%
	KP.2.3	0%	0–1%
	LB.1	0%	NA
	JN.1.18.6	0%	0–1%
	JN.1	0%	0–1%
	KP.1.1.3	0%	NA
	KP.2	0%	NA
	JN.1.16	0%	0–1%
	KS.1	0%	NA
	LP.1	0%	NA
	JN.1.16.1	0%	NA
	KP.1.1	0%	NA
	KP.2.15	0%	NA
	JN.1.18	0%	NA
	LF.3.1	0%	NA

# COVID-19 Variant—LP.8.1

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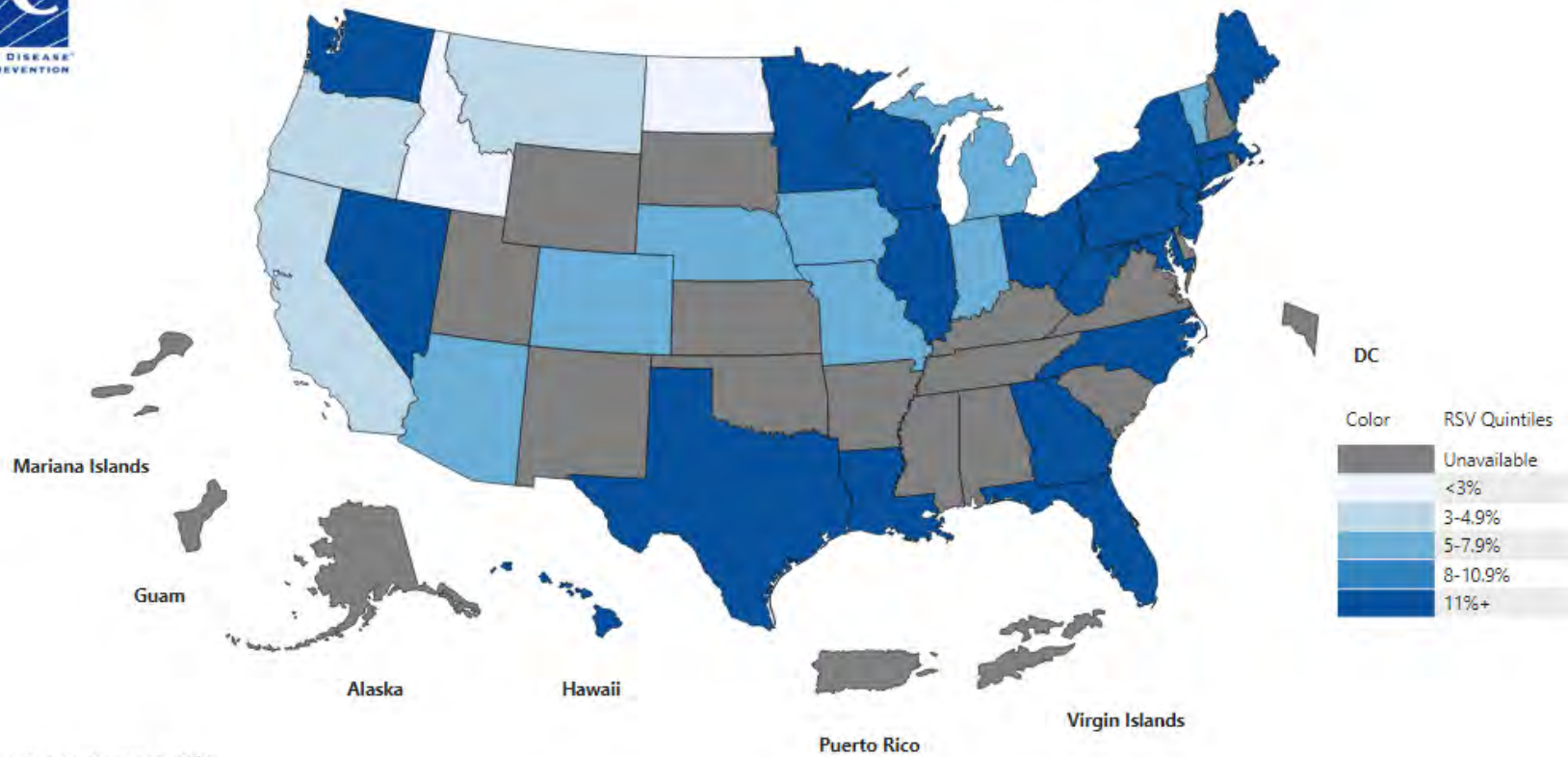
- Discovered in Beijing, China
- Sublineage of JN.1 family
- 8% of cases in the US
- Rapid spread is not yet determined to be due to immune evasion and/or a higher effectiveness
- Suspected superior growth advantage over XEC variant found in one study
- Has shown humoral evasion comparable to XEC
- It's still early and too soon to know what will happen



# RSV



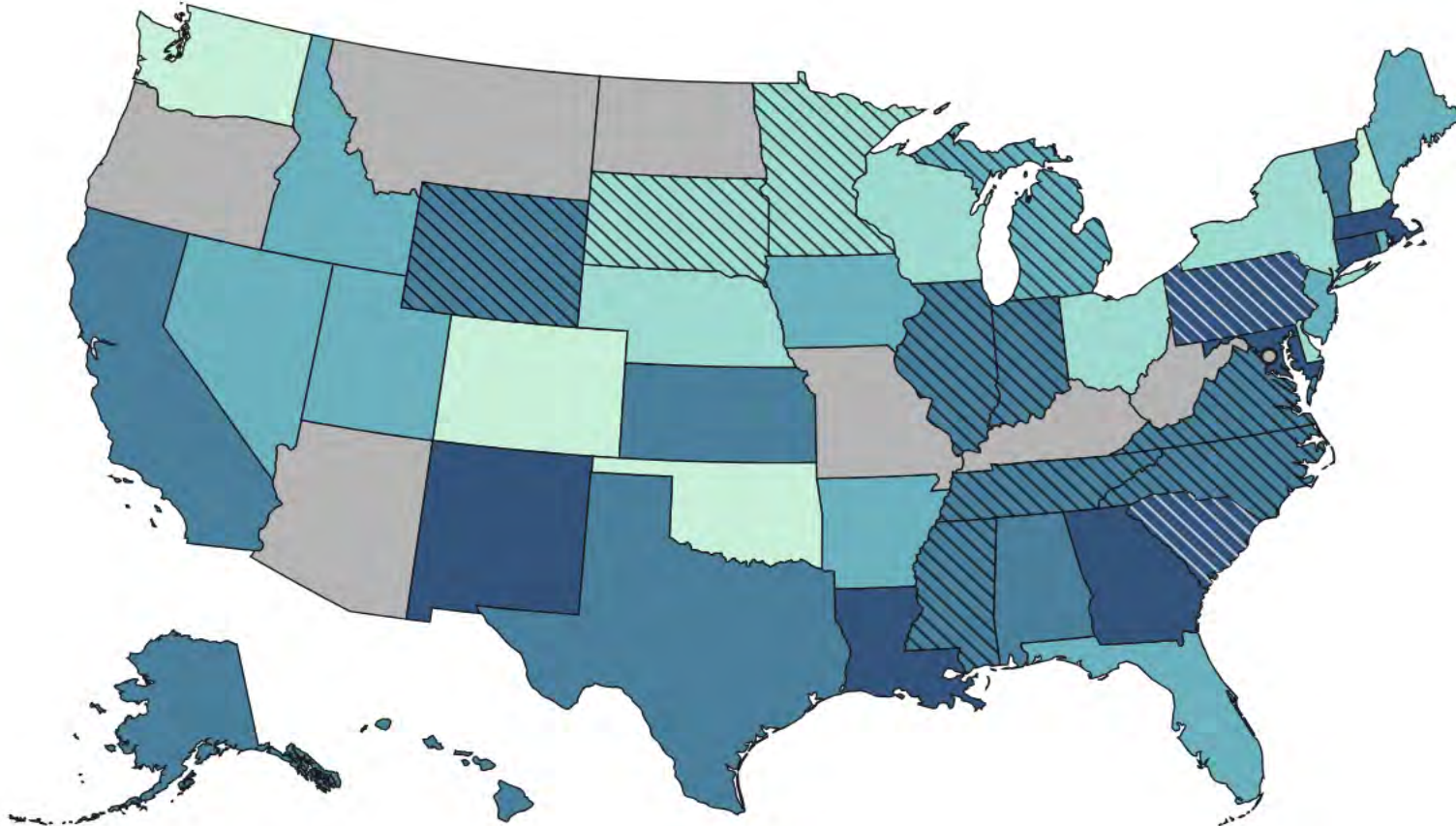
Percentage of RSV tests positive by state and week ending date



Reported was last updated on January 3, 2025.

# Wastewater RSV National Trends

Time Period: December 22 - December 28, 2024



**MODERATE**

Nationally, the wastewater viral activity level for RSV is currently **moderate**.





# State Partner Updates



NORTHWEST PORTLAND AREA  
INDIAN HEALTH BOARD  
*Indian Leadership for Indian Health*



Washington State Department of  
**HEALTH**



@WaDeptHealth @WaHealthSec

## WA DOH Office of Tribal Public Health & Relations

Tuesday, January 7, 2025 | Weekly Update @

# Tribal DSA Consultation – Thursday, January 9<sup>th</sup>, 2025

In accordance with chapter [43.376 RCW](#), the [Washington State Centennial Accord of 1989](#), and the [DOH Consultation and Collaboration Procedure](#), we are inviting Tribes and partners to work with us in formal consultation on finalizing a WA-DOH Tribal Data Sharing Agreement (TDSA) template for availability and use by Tribes.

Meeting Type	Date and Time	Zoom Information
Roundtable #1	Thursday, December 12 <sup>th</sup> , 2024 2 pm – 3:30 pm	<del>847 9211 8164</del> Passcode: 085267
Roundtable #2	Thursday, December 19 <sup>th</sup> , 2024 2 pm – 3:30 pm	<del>824 0953 7124</del> Passcode: 000133
<b>Consultation</b>	<b>Thursday, January 9<sup>th</sup>, 2025</b> <b>2 pm – 3:30 pm</b>	<b><a href="#">842 0394 4304</a></b> <b>Passcode: 130674</b>

For additional information, please contact Amanda Tjemsland, Senior Tribal Epidemiologist, Office of Health and Science, at [amanda.tjemsland@doh.wa.gov](mailto:amanda.tjemsland@doh.wa.gov) or 360-995-3324, or Candice Wilson, Executive Director, Office of Tribal Public Health and Relations (OTPHR), at [candice.wilson@doh.wa.gov](mailto:candice.wilson@doh.wa.gov) or 360-819-7626.

# Residential Treatment Rulemaking: WORKSHOPS

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**Substitute House Bill 2075**: *Concerning licensing of Indian health care providers as establishments*

We have completed our two listening sessions on the tribal attestation rulemaking and we have workshops coming soon!! In these workshops, we will discuss the rulemaking language around establishing fees for inpatient residential treatment attestation administration; as well as have a greater conversation about the attestation process.

- ZOOM: [847 9211 8164](https://us02zoom.us/j/84792118164)  
Passcode: 085267

Thursday	<del>December 12</del>	<del>11-12:30</del>
Thursday	<del>December 19</del>	<del>11-12:30</del>
Thursday	January 9	11-12:30
Thursday	January 23	11-12:30
Thursday	January 30	11-12:30

For more information, and to sign-up for these workshops, please contact Michelle Weatherly, Facilities Program Manager, at [michelle.weatherly@doh.wa.gov](mailto:michelle.weatherly@doh.wa.gov) and Amber Arndt, Tribal Policy Director OTPHR, at [amber.arndt@doh.wa.gov](mailto:amber.arndt@doh.wa.gov)

# WA HEALTH Permanent Rulemaking: WORKSHOPS

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**Proposed WA Health Permanent Rule-** The CR101 for the proposed rule can be found at the following link: <https://content.govdelivery.com/accounts/WADOH/bulletins/38f2e9f>.

We have completed our two listening sessions on the WA HEALTH permanent rulemaking and we have workshops coming soon!! In these workshops, we will discuss the rulemaking language around bed tracking for inpatient residential treatment facilities; as well as have a greater conversation about the bed tracking process.

- ZOOM: [983 795 4487](https://us02zoom.us/j/9837954487)

Passcode: GW3jLk

Thursday	<del>12/19/2024</del>	<del>1:30 p.m. – 3:00 p.m.</del>
Thursday	1/16/2025	1:30 p.m. – 3:00 p.m.
Thursday	1/30/2025	1:30 p.m. – 3:00 p.m.
Thursday	2/13/2025	1:30 p.m. – 3:00 p.m.
Thursday	2/27/2025	1:30 p.m. – 3:00 p.m.

For more information, please contact Tyler Nowlan, Director Healthcare Analytics, Readiness, and Preparedness [Tyler.Nowlan@doh.wa.gov](mailto:Tyler.Nowlan@doh.wa.gov) | 360-790-1453 and Amber Arndt, Tribal Policy Director OTPHR [amber.arndt@doh.wa.gov](mailto:amber.arndt@doh.wa.gov)



# Infection Prevention Certification Funding Opportunity

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## What does the grant look like?

- \$20,000 grants
- Train & [Certify](#) Infection Preventionists (CIC).
- Applications open to LHJs & Tribal Partners
- Must have staff members who meet the [prerequisites for certification](#).
- Period of performance ends **07/31/2025**



## Opportunity will Provide

- Association of Professionals in Infection Control ([APIC](#)) membership, text, and conference.
- CIC Study Resources & exam reimbursement upon passing
- Infection Control Assessment Response ([ICAR](#)) training & experience
- Study/work hours



## Deliverables

- Participate in training
- Flexible check-ins
- Shadow and perform ICAR/self-assessments
- **Take the CIC exam by 7/31/25**

[Dear Tribal Leader Letter \(sent 10.22.24\)](#)

## Questions? Contact

[andrea.een@doh.wa.gov](mailto:andrea.een@doh.wa.gov)

# The Washington State Department of Health Naloxone for American Indian and Alaska Native Communities

The Washington State Department of Health Overdose Education and Naloxone Distribution Program provides free naloxone for Washington State partners, including tribes, tribal organizations, and Urban Indian Health Organizations.



## Expanding naloxone access within American Indian and Alaska Native communities in Washington State

The Washington State Department of Health operates the Overdose Education and Naloxone Distribution (OEND) Program. The program offers free naloxone, overdose response training, and technical assistance to organizations interested in distributing naloxone to people at risk of opioid overdose.

The OEND program also provides free naloxone and technical assistance to tribes, tribal organizations, and Urban Indian Health Organizations, with the goal of increasing naloxone access for American Indian and Alaska Native communities in Washington State.

For the fiscal year ending June 30, 2024, the OEND program set aside \$800,000 to purchase naloxone for tribal partners. These resources will be made available annually as resources permit.

### How to request naloxone

- To request naloxone, please visit [redcap.link/naloxonefortribes](https://redcap.link/naloxonefortribes) and complete the registration form.
- For more information about this program, please review the Dear Tribal Leader Letter that was sent on January 6, 2023.
- For questions, please email [naloxoneprogram@doh.wa.gov](mailto:naloxoneprogram@doh.wa.gov).



[redcap.link/naloxonefortribes](https://redcap.link/naloxonefortribes)



150-235 September 2023

To request this document in another format, call 1-800-525-0127. Deaf or hard of hearing customers, please call 711 (Washington Relay) or email [civil.rights@doh.wa.gov](mailto:civil.rights@doh.wa.gov).

[Request form for tribes, tribal organizations and Urban Indian Health Organizations to get free naloxone kits](https://redcap.link/naloxonefortribes)



[redcap.link/naloxonefortribes](https://redcap.link/naloxonefortribes)

# GOOD NEWS: DOH MTM in the works!!!

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**DOH will be sending out a DTLL shortly to begin the process of establishing our DOH MTM, in collaboration with the HCA and AIHC.**

- **Listening Session: January 2025**
- **We want to hear from you so we can plan the date/time in a good way.**
- **Stay tuned for DTLL!**



For more information, please contact OTPHR Executive Director Candice Wilson at [Candice.Wilson@doh.wa.gov](mailto:Candice.Wilson@doh.wa.gov)

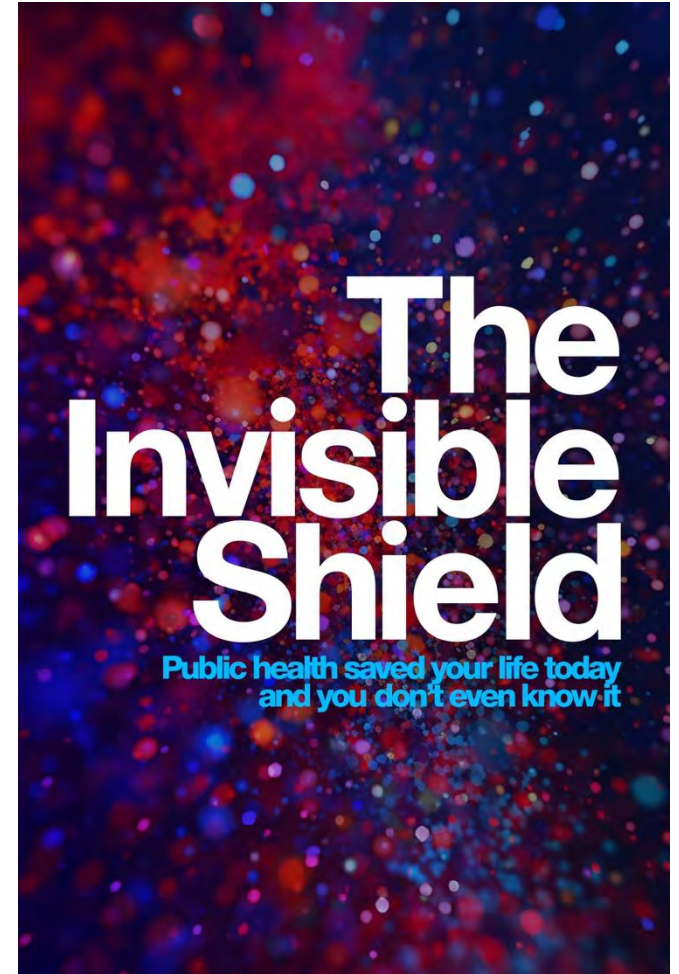
FYI: Like, Subscribe, Share, etc.



[988 Native & Strong Lifeline  
Option 4 - nativelifeline.org](https://nativelifeline.org)



[PBS Invisible Shield](#)



**Native  
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[Native Hub - nativehub.org](https://nativehub.org)

**FOR OUR  
LIVES**

[For Our Lives -  
fornativelives.org](https://fornativelives.org)

OTPHR



Washington State Department of

HEALTH

<b>Candice Wilson Quatz'tenaut (Lummi)</b>	<b>Amber Arndt, MPH (Nisqually)</b>	<b>Rosalinda Turk, MPA (Cherokee)</b>	<b>Michaela Marshall (Lummi)</b>	<b>Lois Scott</b>	<b>OTPHR Office</b>
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# Comments & Questions



NORTHWEST PORTLAND AREA  
INDIAN HEALTH BOARD  
*Indian Leadership for Indian Health*