



INDIAN + COUNTRY  
**ECHO**

**Community Health Aide Project (CHAP) Learning Collaborative: Indian Country ECHO Session – October 8, 2024**

**Echo Title: Clinical Support and Oversight of CHAP Providers 101**

<b>Didactic Speakers</b>	Tribal Community Health Provider Program (TCHPP) staff
<b>Who should join?</b>	Those implementing or interested in learning about the Tribal Community Health Aide Program (CHAP) Behavioral Health Aide (BHA) Education Program, Dental Health Aide (DHA) Program, and the Community Health Aide (CHA) Program in the Pacific Northwest
<b>Collaboration Objectives</b>	To support Indian Health Service, Tribal, and urban organizations staff and programs implementing or interested in the development of the BHA program in the Northwest.
<b>To Join</b>	<p><b>Join Zoom Meeting</b>  <b>To Connect:</b>  <a href="https://echo.zoom.us/j/82185037736?pwd=T092L2FWVmhoMUx2R1lGa0JxSWISZz09">https://echo.zoom.us/j/82185037736?pwd=T092L2FWVmhoMUx2R1lGa0JxSWISZz09</a>            Password: <b>ECHO</b></p> <p><b>Additional Information:</b> Visit: <a href="https://www.indiancountryecho.org/program/chap-echo-learning-collaborative/">https://www.indiancountryecho.org/program/chap-echo-learning-collaborative/</a> or contact us at <a href="mailto:echo@npaihb.org">echo@npaihb.org</a></p>

<b>Time (PT)</b>	<b>Presentation</b>	<b>Speaker(s)</b>
9:00 am	Welcome & Introductions	Lisa Griggs, TCHPP Project Specialist
9:05 am	Dental Health Aide (DHA)	<b>Miranda Davis, DDS, MPH</b> Northwest Dental Health Aide Program Director, Tribal Community Health Provider Program Prevention Consultant, Northwest Tribal Dental Support Center
9:20 am	Behavioral Health Aide (BHA)	<b>Dolores Ann Jimerson, LCSW, ADS, CPC</b> Behavioral Health Education Director
9:40	Community Health Worker and Community Health Aide Providers	<b>Stephannie Christian PA-C</b> , TCHP Education Program Director, Tribal Community Health Provider Program
9:45am	Q&A Latest Update Wrap up	All participants

THIS SESSION MAY BE AUDIO AND VIDEO RECORDED. YOUR PARTICIPATION CONFIRMS YOUR CONSENT TO THIS RECORDING  
 PLEASE NOTE: IF PARTICIPATING VIA AUDIO, PLEASE ANNOUNCE YOUR NAME AND YOUR LOCATION. THANK YOU.

VIDEO TECH SUPPORT: (503) 416-3281

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