



NORTHWEST PORTLAND AREA INDIAN HEALTH BOARD



\$\$\$ ~ Weekly Funding Opportunities Report ~\$\$\$

Friday, September 29, 2017

To: Idaho Delegates, Oregon Delegates, Washington Delegates, Tribal Chairs and Tribal Health Directors

Greetings! The NPAIHB - Funding Opportunity is provided on the basis that when there is pertinent announcements that we are made aware of, received and researched for as part of our commitment to the health and well-being of our tribal members it is posted here for you. Every Friday, new posts will be available (unless there is nothing **“New” Funding Opportunity Information (is provided in this color code)**).

If you have a specific targeted goal, or urgent community needs and find yourself not knowing where to start “looking for a grant” our assistance is available anytime, and we would be very excited to assist you. In addition, at the end of this announcement several funding organizations do not have deadlines and do accept proposals all year round.



### Disabled American Veterans Charitable Service Trust to Begin Accepting Applications for Grant Program

**DEADLINE:** The Trust will begin accepting applications on October 2, 2017 through October 20, 2017. For complete program guidelines and application instructions, visit the DAV website.

**AMOUNT:** (See website for more information.)

**DESCRIPTION:** The Disabled American Veterans Charitable Service Trust will be accepting applications from organizations that provide direct services to sick and injured veterans.

Priority funding areas include food, shelter, and other necessary items for homeless or at-risk veterans; mobility items or assistance specific to veterans with blindness or vision loss, hearing loss, or amputations; qualified therapeutic activities for veterans and/or their families; physical and psychological rehabilitation projects; education, training, and career readiness services; and other forms of assistance as needed, including transportation to VA facilities.

To be eligible, applicants must be tax-exempt organizations that are specifically dedicated to serving sick and injured American veterans and their families are eligible to apply. Applicants are required to provide audited financial statements and IRS form 990 for the year ending September 30, 2016.

The number and amount of grants awarded will vary based upon the total funds available.

**WEBSITE/LINK:** [https://cst.mydav.org/CST/CST\\_Landing.aspx](https://cst.mydav.org/CST/CST_Landing.aspx)



Friday, September 29, 2017

## **RWJF Health Policy Fellows Program Issues Call for Applications**

**DEADLINE:** Application Deadline: November 15, 2017, 3:00 p.m. ET

**AMOUNT:** Up to six awards of up to \$165,000 each will be made in 2018. Fellowship funds of up to \$104,000 may be used for the residential stay (not to exceed the fellow's salary prior to entering the program) from September 1, 2018, through August 31, 2019. The continuation of fringe benefits at levels corresponding to the level of stipend support being requested may be covered with the award, and sponsoring institutions may supplement fellowship funds.

**DESCRIPTION:** The Robert Wood Johnson Foundation Health Policy Fellows program provides the nation's most comprehensive learning experience at the nexus of health, science, and policy in Washington, D.C. It is an outstanding opportunity for exceptional midcareer health professionals and behavioral and social scientists with an interest in health and health care policy. Fellows participate in the policy process at the federal level and use that leadership experience to improve health, health care, and health policy.

**WEBSITE/LINK:** <https://www.rwjf.org/en/library/funding-opportunities/2017/robert-wood-johnson-foundation-health-policy-fellows.html>

## **AARP Foundation Issues RFP for Evidence-Based Solutions for Vulnerable Older Adults**

**DEADLINE:** Application Deadline: November 03, 2017, 3:00 p.m. ET

**AMOUNT:** In this sixth round of the annual Prize competition, up to 10 winning communities will:

Receive a \$25,000 cash prize;

Have their stories and successes celebrated broadly to inspire others toward locally-driven change;

Engage with other national and community leaders as ambassadors for building a Culture of Health; and,

Join a Prize Alumni Network to learn with other Prize winners and network locally, regionally, and nationally.

**DESCRIPTION:** The Robert Wood Johnson Foundation (RWJF) Culture of Health Prize (the Prize) recognizes communities that have placed a priority on health and are creating powerful partnerships and deep commitments that will enable everyone, especially those facing the greatest barriers to good health, the opportunity to live well. A Culture of Health recognizes that health and well-being are greatly influenced by where we live, learn, work, and play; the safety of our surroundings; and the relationships we have in our families and communities. The Prize elevates the compelling stories of local leaders and community members who together are transforming neighborhoods, schools, businesses, and more—so that better health flourishes everywhere.

**WEBSITE/LINK:** <http://www.aarp.org/aarp-foundation/grants/info-2017/advancing-effective-solutions.html>



NORTHWEST PORTLAND AREA INDIAN HEALTH BOARD



\$\$\$ ~ Weekly Funding Opportunities Report ~\$\$\$

Friday, September 29, 2017

## BrightFocus Accepting Applications for Alzheimer's and Glaucoma Research

**DEADLINE:** Various (See website.)

### AMOUNT:

1) Alzheimer's Disease Research: Grants of up to \$300,000 over three years will be awarded to researchers for innovative investigator-initiated research projects. The program is designed to give scientists the opportunity to develop the preliminary data necessary to be considered competitive for larger government or corporate types of sponsorship. Applications must be received no later than October 18, 2017.

2) National Glaucoma Program: Grants of up to \$150,000 over two years will be awarded to researchers for innovative investigator-initiated glaucoma-related research projects. The program is designed to give scientists the opportunity to develop the preliminary data necessary to be considered competitive for larger government or corporate types of sponsorship. Applications must be received no later than November 7, 2017.

**DESCRIPTION:** The BrightFocus Foundation provides research funds for U.S. and international researchers pursuing high-risk studies that illuminate areas for which there currently is little understanding, helping to bring to light crucial knowledge about Alzheimer's disease, glaucoma, and macular degeneration. The organization's mission is to save mind and sight by funding innovative research worldwide and by promoting better health through education.

To that end, the foundation is accepting applications for its Alzheimer's Disease Research and National Glaucoma Research programs.

**WEBSITE/LINK:** <https://www.brightfocus.org/grants/apply-for-grant>

## Evaluation of Policies for the Primary Prevention of Multiple Forms of Violence

Department of Health and Human Services - Centers for Disease Control and Prevention - ERA

**DEADLINE:** Feb 01, 2018 Electronically submitted applications must be submitted no later than 5:00 p.m., ET, on the listed application due date.

**AMOUNT:** \$350,000 x 2 awards

**DESCRIPTION:** NCIPC is seeking research proposals focused on rigorously evaluating previously or currently implemented federal, state, local, tribal or organizational policies for impacts on multiple forms of violence, including child abuse and neglect, youth violence, intimate partner violence, sexual violence and/or suicide. The proposed research should evaluate the impact of a selected policy on reducing rates of at least two of these violence outcomes. The proposed research must focus on a policy that has not yet been rigorously evaluated. Applicants are encouraged to assess the impact of the policy on as many violence outcomes that is feasible as well as risk and protective factors that are common to multiple forms of violence. The proposed research will add to the limited evidence base regarding the impact of policies on preventing multiple forms of violence by rigorously evaluating federal, state, local, or organizational policy approaches.



NORTHWEST PORTLAND AREA INDIAN HEALTH BOARD



\$\$\$ ~ Weekly Funding Opportunities Report ~\$\$\$

Friday, September 29, 2017

**WEBSITE/LINK:** <https://www.grants.gov/web/grants/view-opportunity.html?oppId=297311>

**DELTA (Domestic Violence Prevention Enhancement and Leadership Through Alliances) Impact - Department of Health and Human Services - Centers for Disease Control - NCIPC**

**DEADLINE:** Jan 15, 2018 Electronically submitted applications must be submitted no later than 11:59 p.m., ET, on the listed application due date.

**AMOUNT:** \$410,000 x 10

**DESCRIPTION:** Violence is a serious, yet preventable, public health problem. Intimate partner violence (IPV) (see glossary for a list of definitions of italicized words) affects millions of women, men, and children. In the United States, 1 in 4 women and 1 in 9 men experience contact sexual violence, physical violence, and/or stalking by an intimate partner with a negative impact such as injury, fear, concern for safety, or needing services (Smith et al, 2017). The Center for Disease Control's (CDC) National Intimate Partner and Sexual Violence Survey (NISVS) data showed many victims of IPV began experiencing these forms of violence prior to adulthood (Smith, et al, 2017). About 7% of women and 4% of men in the US reported their first experience of IPV before age 18 (Smith et al, 2017). Community and societal-level prevention activities can address risk and protective factors associated with IPV and may have the broadest public health impact. Authorized by the Family Violence and Prevention Services Act (FVPSA), CDC has funded the Domestic Violence Prevention Enhancements and Leadership Through Alliances (DELTA) Program since 2002. The DELTA program funds State Domestic Violence Coalitions (SDVCs) to implement statewide IPV prevention efforts, while also providing assistance and funding for local communities to implement IPV prevention activities. Different iterations of DELTA have focused funding on increasing organizational capacity, implementation and evaluation of IPV primary prevention activities. The purpose of this NOFO is to bring about decreases in IPV risk factors and increases in IPV protective factors by increasing strategic data-driven planning and sustainable use of community and societal level primary prevention activities that address the social determinants of health (SDOH) and are based on the best available evidence. In addition, the NOFO will help to further develop the evidence-base for community and societal-level programs and policy efforts to prevent IPV by increasing the use of evaluation and existing surveillance data at the state and local level. Another goal of the NOFO is for SDVCs to support the integration of primary prevention goals and action steps throughout the state and local level IPV planning and capacity building activities. The aim of integrating primary prevention into state planning is to help states leverage diverse funding and partnerships to increase the implementation of primary prevention above and beyond DELTA funding. DELTA Impact requires SDVCs to focus on the implementation of 3 to 4 evidence-informed programs and policy efforts within three specific focus areas. SDVCs will also focus on developing or enhancing an already-existing State Action Plan (SAP) to increase the use of data for planning and the prioritization of primary prevention of IPV based on any existing health inequities within their jurisdictions. SDVCs will be expected to participate in the national evaluation of the NOFO and provide leadership at the state and national level. They will also provide funding and technical assistance to the Coordinated Community Response teams (CCRs) selected to implement and evaluate the chosen programs and policy efforts.



Friday, September 29, 2017

**WEBSITE/LINK:** <https://www.grants.gov/web/grants/view-opportunity.html?oppId=297628>

### **Implementing the Most Successful Interventions to Improve HIV/AIDS Outcomes in U.S. Communities (R01- Clinical Trial Optional)**

**DEADLINE:** February 5, 2018

**AMOUNT:** Application budgets are not limited but need to reflect the actual needs of the proposed project.

**DESCRIPTION:** The goal of this funding opportunity announcement (FOA) is to translate and adapt the most successful global, evidence-based HIV-related service provision strategies to marginalized populations in the United States (U.S.) with a substantial risk of HIV-infection and AIDS. The ultimate goal, is to produce improvements in HIV-related health outcomes in these key populations through strategies that successfully and durably reach them with timely HIV testing, prevention and treatment technologies that lead to the achievement of the UNAIDS 90-90-90 benchmarks: by 2020, 90 percent of all people living with HIV will know their HIV status, 90 percent of all people with diagnosed HIV infection will receive sustained antiretroviral therapy and 90 percent of all people receiving antiretroviral therapy will have viral suppression.

**WEBSITE/LINK:** <https://grants.nih.gov/grants/guide/pa-files/PAR-17-491.html>

### **Collaborative Minority Health and Health Disparities Research with Tribal Epidemiology Centers (R01) - Department of Health and Human Services/National Institutes of Health**

**DEADLINE:** December 4, 2018

**AMOUNT:** \$350,000

**DESCRIPTION:** The purpose of this initiative is to support collaborative research between Tribal Epidemiology Centers and extramural investigators on topics related to minority health and health disparities in American Indian / Alaska Native (AI/AN) populations.

**WEBSITE/LINK:** <https://grants.nih.gov/grants/guide/pa-files/PAR-17-484.html>

### **Research on Transgender Health (R01) - Department of Health and Human Services/National Institutes of Health**

**DEADLINE:** February 5, 2018

**AMOUNT:** Application budgets are not limited but need to reflect the actual needs of the proposed project.

**DESCRIPTION:** This funding opportunity announcement (FOA) calls for research on the health of transgender and gender nonconforming people of all ages, including both youth and adults who are questioning their gender identity and those individuals who are making or who have made a transition from being identified as one gender to the other. This group encompasses individuals whose gender identity differs from the sex on their original birth certificate or whose gender expression varies significantly from what is traditionally associated with or typical for that sex.



Friday, September 29, 2017

**WEBSITE/LINK:** <https://www.grants.gov/web/grants/view-opportunity.html?oppId=297230>

### Girls Grantmaking – Women’s Funding Network

**DEADLINE:** (See website.)

**AMOUNT:** (See website.)

**DESCRIPTION:** Through girls grantmaking programs, young women shape the future of our Network. That’s why we helped launch GirlsGive, a toolkit for funds and foundations to start their own girls-as-grantmakers programs.

In 2012, 25 young women from Arizona, Kansas, Missouri, and Pennsylvania came together for the first national Girls Grantmaking Conference co-hosted by Women’s Funding Network, Chester County Fund for Women and Girls, and Bryn Mawr College. The event provided space for girl grantmakers to build deeper relationships with each other and share experiences and practices.

The leadership of these young women affirmed the need to find more ways to engage the younger generation consistently so that they are helping shape the future of our Network. That’s why in 2014, we are helping to launch GirlsGive, a resource-packed online toolkit that guides other funds and foundations in starting their own girls-as-grantmakers programs.

Designed by and for member funds of the Women’s Funding Network, GirlsGive provides three models of Girls Grantmaking programs for high school aged girls — including templates, common questions, and other tried-and-true tools to get started. If you are interested in developing a program or strengthening an existing program, we hope you will find the GirlsGive Toolkit helpful.

**WEBSITE/LINK:** <http://www.womensfundingnetwork.org/tools-for-change/girls-grantmaking-toolkit/> <http://www.womensfundingnetwork.org/>

### GriffinHarte Foundation Invites Applications for Projects Promoting Civil Discourse

**DEADLINE:** December 31, 2017

**AMOUNT:** Grant amounts range between \$100 and \$1,000.

**DESCRIPTION:** The GriffinHarte Foundation promotes civil conversations about issues that divide us and are often contentious and difficult to sort through. These issues usually involve questions of fairness, equity, respect, identity, and the complex ways we are connected to other people.

Because the foundation believes that communication is one of the key elements to understanding and working with social differences, it supports and promotes conversations, research, and scholarship that are grounded in questions and practices of civility and feminism; informed by a desire to define, explore, and advocate for social, political, and economic justice in our professional and personal lives; and are centered in an explicit recognition of the ways lives and communication are influenced by identities —



NORTHWEST PORTLAND AREA INDIAN HEALTH BOARD



\$\$\$ ~ Weekly Funding Opportunities Report ~\$\$\$

Friday, September 29, 2017

gender and sex, race and ethnicity, age and physical abilities, and education and economic standing.

In addition, the foundation supports and promotes educational practices and research that are focused on how we teach as well as what we teach; grounded in a commitment to alternative pedagogies and educational practices; and informed by an explicit recognition of the ways identities, genders and sex, feminisms, civility, and civic engagement relate to social, political and economic justice.

**WEBSITE/LINK:** <http://www.griffinhartefoundation.org/apply-for-a-grant.html>

**(COMMUNITY)**

**Cultivating Cultures for Ethical STEM - National Science Foundation - Alliances for Graduate Education and the Professoriate**

**DEADLINE:** Dec 08, 2017

**AMOUNT:** \$2,000,000

**DESCRIPTION:** The Alliances for Graduate Education and the Professoriate (AGEP) program seeks to advance knowledge about models to improve pathways to the professoriate and success for historically underrepresented minority doctoral students, postdoctoral fellows and faculty, particularly African Americans, Hispanic Americans, American Indians, Alaska Natives, Native Hawaiians, and Native Pacific Islanders, in specific STEM disciplines and/or STEM education research fields. New and innovative models are encouraged, as are models that reproduce and/or replicate evidence-based alliances in significantly different disciplines, institutions, and participant cohorts. The AGEP program goal is to increase the number of historically underrepresented minority faculty, in specific STEM disciplines and STEM education research fields, by advancing knowledge about pathways to career success. The program objectives include: To support the development, implementation and study of innovative models of doctoral education, postdoctoral training, and faculty advancement for historically underrepresented minorities in specific STEM disciplines and/or STEM education research fields; and to advance knowledge about the underlying issues, policies and practices that have an impact on the participation, transitions and advancement of historically underrepresented minorities in the STEM academy. The AGEP Transformation Alliance projects are collaborative research projects representing new strategic alliances of institutions and organizations to develop, implement, and study evidence-based models to transform doctoral education, postdoctoral training, and faculty advancement for historically underrepresented minorities in specific STEM disciplines and/or STEM education research fields. Embedded social science and education research contributes to the knowledge base about how transformational models eliminate or mitigate negative factors and promote positive policies and practices for historically underrepresented minorities. AGEP addresses academic workforce development in a broadening participation and institutional capacity building context. Strategic collaborations are encouraged with multiple academic partners, the private sector, non-governmental organizations, professional organizations, government agencies, national laboratories, field stations, teaching and learning centers, informal science centers, and other relevant STEM and/or STEM education research organizations. The AGEP program encourages project leadership by, and partnerships with, all types of minority serving institutions, such as majority minority serving institutions, historically black colleges and universities, high



## NORTHWEST PORTLAND AREA INDIAN HEALTH BOARD



\$\$\$ ~ Weekly Funding Opportunities Report ~\$\$\$

Friday, September 29, 2017

Hispanic enrollment institutions, tribal colleges and universities, and institutions serving native Hawaiians, native Pacific Islanders, and/or Alaskan natives. Note to students and postdoctoral scholars seeking support: The AGEP program does not make awards to individual students or postdoctoral scholars to undertake their education or research activities. Undergraduates and graduate students seeking support for graduate education should review the NSF Graduate Research Fellowship program (GRFP) (<http://nsfgrfp.org/>). Postdoctoral scholars seeking support should review the NSF postdoctoral programs summarized at [www.fastlane.nsf.gov/servlet/fastlane.pdoc.DisplayProgramType](http://www.fastlane.nsf.gov/servlet/fastlane.pdoc.DisplayProgramType). Additionally, some NSF Directorates may have special funding opportunities to support students and postdoctoral trainees that contribute to broadening participation in STEM. NSF principal investigators seeking funds to support students and postdoctoral trainees, who are members of historically underrepresented minority groups, are encouraged to contact their NSF program officer for information on potential opportunities.

**WEBSITE/LINK:** <https://www.grants.gov/web/grants/view-opportunity.html?oppId=292814>

### **FY17 Pre-Disaster Mitigation - Department of Homeland Security - FEMA**

**DEADLINE:** Nov 14, 2017

**AMOUNT:** \$15,000,000 x 250 awards

**DESCRIPTION:** The Pre-Disaster Mitigation (PDM) program makes available Federal funds to State, Local and Tribal Governments to implement and sustain cost-effective measures designed to reduce the risk to individuals and property from natural hazards, while also reducing reliance on Federal funding from future disasters. FEMA will provide allocations of \$575,000 as required by the Stafford Act to states and territories; and a tribal set aside of \$10 million for allocations up to \$575,000 for Native American Indian tribal governments to support overall mitigation planning and projects. The remaining PDM funds will be awarded on a competitive basis with a focus on multi-state/tribal mitigation initiatives. Applicants must submit applications via the Mitigation eGrants system on the FEMA Grants Portal: <https://portal.fema.gov>. Applicants may submit a maximum of 9 project sub-applications notwithstanding any project(s) submitted for the state/territory allocation or tribal set aside. In addition, any state or tribe willing to serve as the applicant for a multi-state or tribal activity may submit one additional plan or project subapplication.

**WEBSITE/LINK:** <https://www.grants.gov/web/grants/view-opportunity.html?oppId=295314>

### **The Beacon Invites Submissions for Technology-Focused K-8 Lesson Plans**

**DEADLINE:** Submit your lesson plan no later than 11:59 PM ET on December 9, 2017.

**AMOUNT:** Share your tech-focused lesson plan with us, and you could win up to \$1,000 for classroom supplies, educational subscriptions and apps for your students, and more.

We'll choose six great lesson plans that follow all submission guidelines and meet or exceed the judging criteria mentioned above. Grant amounts, to be awarded in the form of Visa gift card, are as follows:





NORTHWEST PORTLAND AREA INDIAN HEALTH BOARD



\$\$\$ ~ Weekly Funding Opportunities Report ~\$\$\$

Friday, September 29, 2017

1st & 2nd place: \$1,000 each

3rd, 4th, 5th, & 6th place: \$500 each

**DESCRIPTION:** Technology is all around us. From smartphones to voice assistants and self-driving cars, our world is becoming increasingly high-tech. We believe technology has a place in every discipline — and studying its role in our lives is critical for students of all ages. Share your tech-focused lesson plan with us, and you could win up to \$1,000 for classroom supplies, educational subscriptions and apps for your students, and more.

We're looking for lesson plans that...

Teach students why technology is important (and how to use it) in your subject

Include a detailed description of lessons, handouts, homework assignments, etc., plus a list of required resources

Encourage participation and engagement with in-class demonstrations, hands-on learning opportunities, etc.

Are designed for students between kindergarten and eighth grade levels

Specify benchmarks for measuring students' comprehension of major concepts

Are solely your work, without the use of prepared educational materials available elsewhere

**WEBSITE/LINK:** <https://fios.verizon.com/beacon/technology-teacher-grant/>

**Smith Richardson Foundation Accepting Applications for Domestic Public Policy Program**

**DEADLINE:** Open (Concept Paper)

**AMOUNT:** In previous years, grant amounts have ranged between \$25,000 and \$104,000.

**DESCRIPTION:** The mission of the Smith Richardson Foundation is to contribute to important public debates and to address serious public policy challenges facing the United States. The foundation seeks to help ensure the vitality of our social, economic, and governmental institutions. It also seeks to assist with the development of effective policies to compete internationally and to advance U.S. interests and values abroad.

The foundation's Domestic Public Policy Program supports projects that aim to help the public and policy makers understand and address critical challenges facing the United States. To that end, grants will be awarded to support research on and evaluation of existing public policies and programs, as well as projects that inject new ideas into public debates.

**WEBSITE/LINK:** <https://www.srf.org/programs/domestic-public-policy/>

**Brady Education Foundation Seeks Applications for Program Development and Evaluation**



NORTHWEST PORTLAND AREA INDIAN HEALTH BOARD



\$\$\$ ~ Weekly Funding Opportunities Report ~ \$\$\$

Friday, September 29, 2017

**DEADLINE:** Stage-One applications must be received no later than December 1, 2017. Upon review, selected applicants will be invited to submit Stage-Two applications by April 1, 2018.

**AMOUNT:** 1. Program Development grants have ranged between \$25,000 and \$276,000. 2. Existing Program Evaluation grants have ranged between \$241,000 and \$792,000.

**DESCRIPTION:** The Brady Education Foundation seeks to close the achievement/opportunity gap for children at risk for poor school outcomes due to environmental factors associated with living in poverty.

To advance this mission, the foundation is accepting Stage-One applications for projects related to the development and evaluation of programs that are consistent with a strength-based approach and show promise of being feasible, effective, and sustainable.

1) Program Development: One-year grants will be awarded for projects to develop and test the feasibility of new programs for promoting positive cognitive and/or achievement outcomes for children (birth through 18 years) from underserved groups and/or low-resourced communities (minority ethnic groups, low-income families). Priority will be given to projects that represent strong collaborative relationships between researchers and practitioners, as well as other community stakeholders as appropriate, and where the community/population being studied is represented in the project's leadership team; develop programs consistent with strength-based approaches rather than deficit models; leverage other funding; and/or develop programs that, in addition to showing promise of being effective, show promise of being affordable, accessible, and sustainable. Past Program Development grants have ranged between \$25,000 and \$276,000.

2) Existing Program Evaluation: Grants for up to three years will be awarded for projects that evaluate the effectiveness of programs designed to promote positive cognitive and/or achievement outcomes for children (birth through 18 years) from underserved groups and/or low-resourced communities (minority ethnic groups, low-income families). Preference will be given to projects that represent strong collaborative relationships between researchers and practitioners, as well as other community stakeholders as appropriate, and where the community/population being studied is represented in the project's leadership team; projects that evaluate programs consistent with strength-based approaches rather than deficit models; projects for which operational funding for the program is already secured so that funding from the foundation is used only for evaluation activities; projects that evaluate programs that show promise of being affordable, accessible, and sustainable; projects that employ randomized control designs (including wait list-control designs when assignment to wait-list condition is randomized); and/or projects that evaluate effects on measurable child outcomes. Past Existing Program Evaluation grants have ranged between \$241,000 and \$792,000.

To be eligible, applicants must be nonprofit organizations recognized as tax-exempt under Section 501(c)(3) of the United States Internal Revenue Code.

**WEBSITE/LINK:**

<http://www.bradyeducationfoundation.org/applicationguidelines.html>



NORTHWEST PORTLAND AREA INDIAN HEALTH BOARD



\$\$\$ ~ Weekly Funding Opportunities Report ~\$\$\$

Friday, September 29, 2017

**FY17 Flood Mitigation Assistance - Department of Homeland Security - FEMA**

**DEADLINE:** Nov 14, 2017

**AMOUNT:** (See announcement.)

**DESCRIPTION:** The Flood Mitigation Assistance (FMA) Program makes available Federal funds to State, Local and Tribal Governments to reduce or eliminate the risk of repetitive flood damage to buildings and structures insured under the National Flood Insurance Program (NFIP). In FY17, the FMA Program will prioritize proposals that address community flood risk by setting aside \$70 million for this purpose. FEMA will seek to fund two types of community flood mitigation activities: Advance Assistance for flood mitigation design and development of community flood mitigation projects and mitigation projects that address community flood risk for the purpose of reducing NFIP flood claim payments. The remaining funding, at least \$90,000,000, will be used for FMA technical assistance, mitigation planning, and mitigation projects reducing risk to severe repetitive loss (SRL) and repetitive loss (RL) properties. Applicants must submit applications via the Mitigation eGrants system on the FEMA Grants Portal: <https://portal.fema.gov>. Applicants may submit a maximum of 1 advanced assistance and 1 community mitigation project sub-application.

**WEBSITE/LINK:** <https://www.grants.gov/web/grants/view-opportunity.html?oppld=295313>

**DHS-17-MT-047-000-99**

**FY17 Pre-Disaster Mitigation Department of Homeland Security - Department of Homeland Security - FEMA**

**DEADLINE:** Nov 14, 2017

**AMOUNT:** \$15,000,000 x 250 awards

**DESCRIPTION:** The Pre-Disaster Mitigation (PDM) program makes available Federal funds to State, Local and Tribal Governments to implement and sustain cost-effective measures designed to reduce the risk to individuals and property from natural hazards, while also reducing reliance on Federal funding from future disasters. FEMA will provide allocations of \$575,000 as required by the Stafford Act to states and territories; and a tribal set aside of \$10 million for allocations up to \$575,000 for Native American Indian tribal governments to support overall mitigation planning and projects. The remaining PDM funds will be awarded on a competitive basis with a focus on multi-state/tribal mitigation initiatives. Applicants must submit applications via the Mitigation eGrants system on the FEMA Grants Portal: <https://portal.fema.gov>. Applicants may submit a maximum of 9 project sub-applications notwithstanding any project(s) submitted for the state/territory allocation or tribal set aside. In addition, any state or tribe willing to serve as the applicant for a multi-state or tribal activity may submit one additional plan or project subapplication.

**WEBSITE/LINK:** <https://www.grants.gov/web/grants/view-opportunity.html?oppld=295314>



NORTHWEST PORTLAND AREA INDIAN HEALTH BOARD



\$\$\$ ~ Weekly Funding Opportunities Report ~\$\$\$

Friday, September 29, 2017

**FORECASTED – READ AND PREPARE FOR THIS ANNOUNCEMENT IN ADVANCE.**

**Research to Evaluate Medication Management of Opioids and Benzodiazepines to Reduce Older Adult Falls - Department of Health and Human Services, Centers for Disease Control and Prevention – ERA**

**DEADLINE:** Mar 01, 2018 Electronically submitted applications must be submitted no later than 5:00 p.m., ET, on the listed application due date.

**AMOUNT:** \$750,000

**DESCRIPTION:** The purpose of this research is to identify, implement, and evaluate the use of effective strategies and tools for provider and patient use to taper and/or discontinue opioids, benzodiazepines, and other medications in which risk outweighs benefits to prevent falls, overdose, and other injuries among community dwelling older adults.

**WEBSITE/LINK:** <https://www.grants.gov/web/grants/view-opportunity.html?oppId=297573>

**2017 OCTOBER**

**Multidisciplinary Studies of HIV/AIDS and Aging (R01)- Department of Health and Human Services/National Institutes of Health**

**DEADLINE:** October 05, 2017

**AMOUNT:** (See announcement.)

**DESCRIPTION:** This FOA encourages applications at the intersection of HIV and aging by addressing two overarching objectives: 1) to improve understanding of biological, clinical, and socio-behavioral aspects of aging through the lens of HIV infection and its treatment; and 2) to improve approaches for testing, prevention, and treatment of HIV infection, and management of HIV-related comorbidities, co-infections, and complications in different populations and cultural settings by applying our current understanding of aging science. Applications appropriate to this FOA should be consistent with the scientific priorities outlined by the NIH Office of AIDS Research (OAR) as described in NOT-OD-15-137.

**WEBSITE/LINK:** <https://grants.nih.gov/grants/guide/pa-files/PAR-17-321.html>

**Integration of Individual Residential Histories into Cancer Research (R01)**

**DEADLINE:** October 05, 2017

**AMOUNT:** (See announcement.)

**DESCRIPTION:** The purpose of this Funding Opportunity Announcement (FOA) is to support substantive investigation of the role of individual residential histories in cancer etiology and outcomes, and to encourage the development of complex analytical strategies in support of substantive investigation.

**WEBSITE/LINK:** <https://grants.nih.gov/grants/guide/pa-files/PA-17-298.html>



Friday, September 29, 2017

**Pilot Studies to Test the Initiation of a Mental Health Family Navigator to Promote Early Access, Engagement and Coordination of Needed Mental Health Services for Children and Adolescents (R34) -Department of Health and Human Services/National Institutes of Health**

**DEADLINE:** October 5, 2017

**AMOUNT:** (See Announcement.)

**DESCRIPTION:** The purpose of this Funding Opportunity Announcement (FOA) is to encourage research applications to develop and pilot test the effectiveness and implementation of family navigator models designed to promote early access, engagement and coordination of mental health treatment and services for children and adolescents who are experiencing early symptoms of mental health problems. For the purposes of this FOA, NIMH defines a family navigator model as a health care professional or paraprofessional whose role is to deploy a set of strategies designed to rapidly engage youth and families in needed treatment and services, work closely with the family and other involved treatment and service providers to optimize care and monitor the trajectory of mental health symptoms and outcomes over time. Applicants are encouraged to develop and pilot test the navigator model's ability to promote early access, engagement and coordination of mental health treatment and services for children and adolescents as soon as symptoms are detected. Of interest are navigator models that coordinate needed care strategies, determine the "personalized match" to the level of needed service amount, frequency and intensity, and harness novel technologies to track and monitor the trajectory of clinical, functional and behavioral progress toward achieving intended services outcomes.

**WEBSITE/LINK:** <https://grants.nih.gov/grants/guide/pa-files/PAR-17-266.html>

**Research to Advance Vaccine Safety (R01) - Department of Health and Human Services/National Institutes of Health**

**DEADLINE:** October 5, 2017

**AMOUNT:** Application budgets are not limited but need to reflect the actual needs of the proposed project. The maximum project period is 5 years.

**DESCRIPTION:** The purpose of this funding opportunity announcement (FOA) is to support research that will contribute to the overall understanding of vaccine safety. This research opportunity encourages studies that address scientific areas potentially relevant to vaccine safety such as 1) physiological and immunological responses to vaccines and vaccine components, 2) how genetic variations affect immune/physiological responses that may impact vaccine safety, 3) identification of risk factors and biological markers that may be used to assess whether there is a relationship between certain diseases or disorders and licensed vaccines, 4) creation/evaluation of statistical methodologies for analyzing data on vaccine safety, including data available from existing data sources such as passive reporting systems or healthcare databases, or 5) the application of genomic/molecular technologies and systems biology approaches to evaluate vaccine safety. This FOA aligns with the research goals and objectives outlined in the U.S. National Vaccine Plan).

**WEBSITE/LINK:** <https://grants.nih.gov/grants/guide/pa-files/PA-15-312.html>



Friday, September 29, 2017

**Self-Management for Health in Chronic Conditions (R01) - Department of Health and Human Services/National Institutes of Health**

**DEADLINE:** October 5, 2017

**AMOUNT:** Application budgets are not limited but need to reflect the actual needs of the proposed project. The maximum project period is 5 years.

**DESCRIPTION:** The purpose of this initiative is to support research in self-management focused across conditions. A recent report from the Institute of Medicine (IOM) identifies the epidemic of chronic condition as the nations leading health challenge and calls for cross-cutting, coordinated public health actions for living well with chronic illness. This Funding Opportunity Announcement (FOA) addresses that recommendation by describing an initiative that focuses on self-management as a mainstream science in order to reduce the burden of chronic illnesses/conditions. Self-management is the ability of the individual, in conjunction with family, community, and healthcare professionals, to manage symptoms, treatments, lifestyle changes, and psychosocial, cultural, and spiritual consequences associated with a chronic illness or condition.

**WEBSITE/LINK:** <https://grants.nih.gov/grants/guide/pa-files/PA-14-344.html>

**Pregnancy in Women with Disabilities (R01) - Department of Health and Human Services/National Institutes of Health**

**DEADLINE:** October 5, 2017

**AMOUNT:** The number of awards is contingent upon NIH appropriations and the submission of a sufficient number of meritorious applications. Application budgets are not limited but need to reflect the actual needs of the proposed project.

**DESCRIPTION:** This funding opportunity announcement (FOA) issued by the Eunice Kennedy Shriver National Institute of Child Health and Human Development (NICHD) encourages research project grants (R01) investigating the incidence, course, and outcomes of pregnancy among women with disabilities. Areas of interest also include studies to inform preconceptional and antenatal counseling and strategies for addressing barriers to prenatal care, and management of pregnancy, the puerperium, and the transition to parenthood in order to optimize outcomes for women with physical, intellectual and developmental, and/or sensory disabilities and their families. Applicants are encouraged to include women with disabilities and members of the community in the design and conduct of their research.

**WEBSITE/LINK:** <https://grants.nih.gov/grants/guide/pa-files/PA-17-452.html# Section II. Award 1>

**Wildhorse Foundation Accepting Applications for Northwestern Tribes**

**DEADLINE:** October 1, 2017

**AMOUNT:** Grants of up to \$20,000 will be awarded in the areas of arts, cultural activities, education, environmental protection, gambling addiction prevention education and treatment, historic preservation, public health, public safety, and salmon restoration.



NORTHWEST PORTLAND AREA INDIAN HEALTH BOARD



\$\$\$ ~ Weekly Funding Opportunities Report ~\$\$\$

Friday, September 29, 2017

**DESCRIPTION:** The Wildhorse Foundation serves the tribes of the Umatilla Indian Reservation (Cayuse, Umatilla, and Walla Walla) in the area now known as northeastern Oregon and southeastern Washington. Each year the foundation makes grants to eligible organizations in that homeland area.

Eligible applicants include tribes located in Morrow, Umatilla, Union, and Wallowa counties in Oregon; tribes ceded territory in Washington, which is most of Benton, Columbia, and Walla Walla counties; and the Confederated Tribes of the Umatilla Indian Reservation. In addition, any Native American tribal government agency or Native American charitable organization with its principal office and base of operations within the State of Oregon or any national or regional Indian organization is eligible to apply.

**WEBSITE/LINK:** <http://www.thewildhorsefoundation.com/application/>

**Peter G. Dodge Foundation Accepting Applications for Mission Grants Program**

**DEADLINE:** October 1, 2017

**AMOUNT:** Up to \$10,000

**DESCRIPTION:** The primary mission of the Peter G. Dodge Foundation is to help people lead lives free from the effects of alcohol addiction. By increasing treatment options, elevating awareness, and facilitating access, the foundation works to create a new paradigm for what treatment and recovery can be.

**WEBSITE/LINK:** <https://www.pgdf.org/pgdf-calls-for-proposals-for-october-1-mission-grant-deadline-2017/>

**Detecting and Preventing Suicide Behavior, Ideation and Self-Harm in Youth in Contact with the Juvenile Justice System (R01) - Department of Health and Human Services/National Institutes of Health**

**DEADLINE:** October 05, 2017

**AMOUNT:** Application budgets are limited to \$500,000 direct costs (excluding consortium F&A) per budget year and should reflect the actual needs of the proposed project. The total project period for applications submitted in response to this FOA may not exceed five years.

**DESCRIPTION:** This initiative supports research to test the effectiveness of combined strategies to both detect and intervene to reduce the risk of suicide behavior, suicide ideation, and non-suicidal self-harm (NSSI) by youth in contact with the juvenile justice system. Opportunities for detection and prevention start at early points of contact (e.g., police interaction, the intake interview) and continue through many juvenile justice settings (e.g., pre-trial detention, juvenile or family court activities, court disposition, placement and on-going care in either residential or multiple community settings.) This FOA invites intervention strategies that are designed to be delivered in typical service settings using typically available personnel and resources, to enhance the implementation of interventions that prove effective, enhance their future uptake in diverse settings, and thereby reduce risk of suicide and self-harm in this population.

**WEBSITE/LINK:** <https://grants.nih.gov/grants/guide/pa-files/PAR-16-299.html>



Friday, September 29, 2017

**U.S. Tobacco Control Policies to Reduce Health Disparities (R01) - Department of Health and Human Services/National Institutes of Health**

**DEADLINE:** October 05, 2017

**AMOUNT:** Application budgets are not limited but need to reflect the actual needs of the proposed project. The maximum project period is 5 years.

**DESCRIPTION:** The purpose of this Funding Opportunity Announcement (FOA) is to support observational or intervention research focused on reducing health disparities in tobacco use in the United States. Specifically, this FOA is intended to stimulate scientific inquiry focused on innovative tobacco control policies. Applicants may propose projects in which the primary outcome of interest is on reducing tobacco use health disparities in vulnerable populations by utilizing tobacco prevention and control strategies. The long-term goal of this FOA is to reduce health disparities in health outcomes thereby reducing the excess disease burden of tobacco use within these groups. Applicants submitting applications related to health economics are encouraged to consult NOT-OD-16-025 to ensure that applications align with NIH mission priorities in health economics research.

**WEBSITE/LINK:** <https://grants.nih.gov/grants/guide/pa-files/PAR-17-217.html# Section II. Award 1>

**Intervening with Cancer Caregivers to Improve Patient Health Outcomes and Optimize Health Care Utilization (R01) - Department of Health and Human Services/National Institutes of Health**

**DEADLINE:** October 10, 2017

**AMOUNT:** Application budgets are not limited but need to reflect the actual needs of the proposed project. The scope of the proposed project should determine the project period. The maximum project period is 5 years.

**DESCRIPTION:** This Funding Opportunity Announcement (FOA) invites applications for intervention research designed to support caregivers of adult cancer patients. Interventions supported by this FOA are intended to provide caregivers with care training, promote coping skills, and ultimately help them manage care. Outcomes of such interventions are expected to (1) optimize patient health care utilization, (2) improve caregiver well-being, and (3) improve patient physical health and psychosocial outcomes.

**WEBSITE/LINK:** <https://grants.nih.gov/grants/guide/pa-files/PAR-16-317.html>

**Truth Initiative Apply: 2017 tobacco-free college program for community colleges and minority-serving institutions**

**DEADLINE:** Wednesday, Oct. 11, 2017.

**AMOUNT:** 17-month grants of up to \$20,000 to community colleges and minority-serving institutions to adopt a 100 percent tobacco-free college policy.

**DESCRIPTION:** In the fight to curb tobacco use in the U.S., college campuses have emerged as a critical battleground.





NORTHWEST PORTLAND AREA INDIAN HEALTH BOARD



\$\$\$ ~ Weekly Funding Opportunities Report ~\$\$\$

Friday, September 29, 2017

That's because virtually all smokers—99 percent—start smoking before turning 26 years old. Community colleges and minority-serving academic institutions are especially important because they tend to serve students who are at greater risk for tobacco use, including low-income and first-generation students.

Over the past two years, Truth Initiative® has awarded funding to 135 historically black colleges and universities and community colleges to advocate for, adopt and implement a 100 percent smoke- or tobacco-free policy. These institutions have joined the growing movement of smoke-free colleges, which multiplied in number from 446 in 2010 to over 1,900 in 2017.

**WEBSITE/LINK:** <https://truthinitiative.org/collegegrant>

**U.S. Tobacco Control Policies to Reduce Health Disparities (R01) -Department of Health and Human Services/National Institutes of Health**

**DEADLINE:** October 11, 2017

**AMOUNT:** (See announcement.)

**DESCRIPTION:** The purpose of this Funding Opportunity Announcement (FOA) is to support observational or intervention research focused on reducing health disparities in tobacco use in the United States. Specifically, this FOA is intended to stimulate scientific inquiry focused on innovative tobacco control policies. Applicants may propose projects in which the primary outcome of interest is on reducing tobacco use health disparities in vulnerable populations by utilizing tobacco prevention and control strategies. The long-term goal of this FOA is to reduce health disparities in health outcomes thereby reducing the excess disease burden of tobacco use within these groups. Applicants submitting applications related to health economics are encouraged to consult NOT-OD-16-025 to ensure that applications align with NIH mission priorities in health economics research.

**WEBSITE/LINK:** <https://grants.nih.gov/grants/guide/pa-files/PAR-17-217.html>

**Multidisciplinary Studies of HIV/AIDS and Aging (R03) Department of Health and Human Services/National Institutes of Health**

**DEADLINE:** October 16, 2017

**AMOUNT:** \$50,000

**DESCRIPTION:** This FOA invites applications proposing to study HIV infection, HIV-associated conditions, HIV treatment, and/or biobehavioral or social factors associated with HIV/AIDS in the context of aging and/or in older adults. Research approaches of interest include clinical translational, observational, and intervention studies in domestic and international settings.

**WEBSITE/LINK:** <https://grants.nih.gov/grants/guide/pa-files/PAR-15-281.html>

**Zero Suicide Initiative Funding Announcement - Indian Health Service (IHS), Office of Clinical and Preventive Service, Division of Behavioral Health (DBH)**

**DEADLINE:** October 12, 2017



NORTHWEST PORTLAND AREA INDIAN HEALTH BOARD



\$\$\$ ~ Weekly Funding Opportunities Report ~ \$\$\$

Friday, September 29, 2017

**AMOUNT:** Individual award amounts are anticipated \$400,000 and approximately five (5) awards will be issued under this program announcement.

**DESCRIPTION:** The purpose of this cooperative agreement is to improve the system of care for those at risk for suicide by implementing a comprehensive, culturally informed, multi-setting approach to suicide prevention in Indian health systems. This award represents a continuation of IHS's efforts to implement the Zero Suicide approach in Indian Country. Existing efforts have focused on training, technical assistance, and consultation for several 'pilot' AI/AN Zero Suicide communities. As a result of these efforts, both the unique opportunities and challenges of implementing Zero Suicide in Indian Country have been identified. To best capitalize on opportunities and surmount such challenges, this award focuses on the core Seven Elements of the Zero Suicide model as developed by the Suicide Prevention Resource Center (SPRC):

Lead—Create a leadership-driven, safety-oriented culture committed to dramatically reducing suicide among people under care. Include survivors of suicide attempts and suicide loss in leadership and planning roles;

Train—Develop a competent, confident, and caring workforce;

Identify—Systematically identify and assess suicide risk among people receiving care;

Engage—Ensure every individual has a pathway to care that is both timely and adequate to meet his or her needs. Include collaborative safety planning and restriction of lethal means;

Treat—Use effective, evidence-based treatments that directly target suicidal thoughts and behaviors;

Transition—Provide continuous contact and support, especially after acute care; and

Improve—Apply a data-driven, quality improvement approach to inform system changes that will lead to improved patient outcomes and better care for those at risk.

More specifically, each applicant will be required to address the following goals in their project narrative.

Establishment of a leadership-driven commitment to transform the way suicide care is delivered within AI/AN health systems. Associated activities should describe the organizational steps to broaden the responsibility for suicide care to the entire system and emphasize the specific role of leadership to ensure that it is achieved.

Assessment of training needs and creation of a training plan to develop and advance the skills of health care staff and providers at all levels. The aim of such trainings must target increased competence and confidence in the delivery of culturally informed, evidence-based suicide care.

Implementation of policies and procedures for comprehensive clinical standards, including universal screening, assessment, treatment, discharge planning, follow-up, and means restriction for all patients under care and at risk for suicide (see [https://www.jointcommission.org/sea\\_issue\\_56/](https://www.jointcommission.org/sea_issue_56/)).

Development of strategy to collect, analyze, use, and disseminate data to enhance and better inform suicide care across the health system.



NORTHWEST PORTLAND AREA INDIAN HEALTH BOARD



\$\$\$ ~ Weekly Funding Opportunities Report ~\$\$\$

Friday, September 29, 2017

Application of evidence-based practices to screen, assess, and treat individuals at risk for suicide that incorporates culturally informed practices and activities.

Development of a Suicide Care Management Plan for every individual identified as at risk of suicide to include continuous monitoring of the individual's progress through their electronic health record (EHR) or other data management system, and adjust treatment as necessary. The Suicide Care Management Plan must include the following:

- Protocols for safety planning and reducing access to lethal means;
- Rapid follow-up of adults who have attempted suicide or experienced a suicidal crisis after being discharged from a treatment facility e.g., local emergency departments, inpatient psychiatric facilities, including direct linkage with appropriate health care agencies to ensure coordinated care services are in place;
- Protocols to ensure client safety, especially among high-risk adults in health care systems who have attempted suicide, experienced a suicidal crisis, and/or have a serious mental illness. This must include outreach telephone contact within 24 to 48 hours after discharge and securing an appointment within 1 week of discharge.

**WEBSITE/LINK:**

<https://www.ihs.gov/suicideprevention/zerosuicide/fundingannouncement/>

<https://www.federalregister.gov/documents/2017/08/21/2017-17599/division-of-behavioral-health-office-of-clinical-and-preventive-services-zero-suicide>

**FLUSH TRANSPHOBIA FUND - Grants for groups, nonprofits, & coalitions in the USA, regardless of 501c3 status or fiscal sponsorship**

**DEADLINE:** Third Wave's Flush Transphobia Fund is a rapid response fund that supports the leadership of transgender, non-binary, and gender non-conforming youth of color and low-income youth to respond to anti-trans legislation and ballot initiatives.

How it works:

Proposals are accepted all year, and reviewed on the 15th day of the month. Faster reviews are possible for emergencies. Proposals must be submitted by midnight (in your time zone) on the 14th to be considered. \*\* See note below \*\*

Groups are notified within one to two weeks after the review date & checks are generally mailed within two to three weeks.

**AMOUNT:** Grants can be made for up to \$3,000 USD. Larger grants may be made on a case-by-case basis.

Coalitions or joint proposals can request up to \$10,000.

**DESCRIPTION:** About Third Wave Fund: Third Wave Fund is the only national fund that supports youth-led Gender Justice activism to advance the political power, well-being, and self determination of communities of color and low-income communities in the United States.

We hold the following beliefs:



NORTHWEST PORTLAND AREA INDIAN HEALTH BOARD



\$\$\$ ~ Weekly Funding Opportunities Report ~\$\$\$

Friday, September 29, 2017

People directly impacted by an issue are best positioned to design and lead solutions.

The leadership of young women of color, trans, intersex, queer and gender non-conforming youth brings critical analysis and power to all social justice movements.

We will only achieve deep and lasting change if we address the root cause of an issue. Why was it created?: To support bold activism in real time.

We launched this fund because trans communities are in the spotlight right now. Heightened focus on trans people has led to some positive changes, but it has also produced a significant amount of backlash. All the while, funding for grassroots, trans-led efforts is few and far between. Bathroom bills are signing transphobia into laws across the US at an incredibly fast pace, particularly hitting communities and states that are under-resourced and that lack trans organizing infrastructure. This fund was created to allow trans organizers the ability to respond to immediate threats and opportunities with flexible and responsive funding.

**WEBSITE/LINK:** <http://thirdwavefund.org/flush-transphobia-fund.html>

**NIDCR Behavioral or Social Intervention Clinical Trial Planning Grant (R34) - Department of Health and Human Services/National Institutes of Health**

**DEADLINE:** October 16, 2017

**AMOUNT:** Direct costs may not exceed \$150,000.

**DESCRIPTION:** The NIDCR will support R34 grants for the planning and design of clinical studies to test behavioral or social interventions related to its mission (for details, please see: <http://www.nidcr.nih.gov/Research/DER/bssrb.htm>). The R34 grant will support activities that include, but are not limited to: the development of the behavioral or social intervention manual and procedures for training interventionists; development of the clinical protocol that will guide a subsequent clinical trial; the tools for data management, participant safety and operational oversight; and other activities to prepare for a subsequent clinical trial. R34 applications preparing for a behavioral or social intervention study may involve human subjects as part of small-scale testing of the feasibility and acceptability of the intervention(s), measures, methods, training approaches, etc. However, the R34 planning grant is not meant to support efficacy testing of interventions.

**WEBSITE/LINK:** <https://grants.nih.gov/grants/guide/pa-files/PAR-14-342.html>

**Technical Assistance Services to Improve the Control and Prevention Efforts of Tuberculosis (TB) under the President's Emergency Plan for AIDS Relief (PEPFAR) - Department of Health and Human Services/Centers for Disease Control - CGH**

**DEADLINE:** Oct 17, 2017 Electronically submitted applications must be submitted no later than 11:59 p.m., ET, on the listed application due date.

**AMOUNT:** \$250,000

**DESCRIPTION:** Despite being preventable and treatable, tuberculosis (TB) is the leading infectious disease killer worldwide. Building sustainable public health systems, including building local capacity and expertise to develop, plan, implement, and manage public health activities and programs, have proven to be critical in the improvement and strengthening



Friday, September 29, 2017

of public health programs and interventions. The goal of this NOFO is to strengthen the effectiveness of national TB control and prevention programs in PEPFAR-supported countries and countries and settings with high TB burden by providing high-quality, targeted, and on-the-ground technical assistance and interventions in the areas of capacity building, monitoring and evaluation, data management, and outcome measurement.

**WEBSITE/LINK:** <https://www.grants.gov/web/grants/view-opportunity.html?oppId=293342>

**Strengthening Implementation and Use of Effective Health Information Systems through Improved Governance, Design, Planning, Capacity Development, and Technical Implementation under the President's Emergency Plan for AIDS Relief (PEPFAR) - Department of Health and Human Services/Centers for Disease Control - CGH**

**DEADLINE:** Oct 17, 2017 Electronically submitted applications must be submitted no later than 11:59 p.m., ET, on the listed application due date.

**AMOUNT:** \$10,000,000/7 AWARDS

**DESCRIPTION:** Millions of people with HIV/AIDS now have extended life spans as a result of targeted HIV testing services and scale-up of effective anti-retroviral therapy (ART), resulting in increased need to 1) effectively manage large volumes of data; 2) accurately track patient cohorts across space and time; 3) track utilization of human and material resources; and 4) support evidence-driven decisions. Interoperable health information systems (HIS), including electronic medical records (EMR) and laboratory information systems (LIS), are essential tools for collecting, managing, and using these data. This NOFO will support countries to 1) design, develop, implement, and evaluate HIS; 2) develop and improve policy, governance, and infrastructure needed to implement HIS and increase sustainability and country ownership; 3) sustain informatics workforce and capacity development; and 4) protect, secure, standardize, exchange, and share data to improve health.

**WEBSITE/LINK:** <https://www.grants.gov/web/grants/view-opportunity.html?oppId=293340>

**Strategies to Increase Delivery of Guideline-Based Care to Populations with Health Disparities (R01) - Department of Health and Human Services/National Institutes of Health**

**DEADLINE:** October 20, 2017

**AMOUNT:** Application budgets are not limited but need to reflect the actual needs of the proposed project. The scope of the proposed project should determine the project period. The maximum project period is 5 years.

**DESCRIPTION:** This Funding Opportunity Announcement (FOA) invites applications to conduct innovative and feasible studies to test strategies to accelerate the adoption of guideline-based recommendations into clinical practice among populations with health disparities. Applications that propose strategies with a focus on providers who care for clinical populations with excess burden of cardiovascular, lung, blood, and sleep diseases and disorders, in concert with the health care delivery systems in which they practice, are



NORTHWEST PORTLAND AREA INDIAN HEALTH BOARD



\$\$\$ ~ Weekly Funding Opportunities Report ~\$\$\$

Friday, September 29, 2017

strongly encouraged. Applications that test systems, infrastructures, and strategies to implement guideline-based care for NHLBI disorders in clinical care settings are also of high programmatic interest.

**WEBSITE/LINK:** <https://www.grants.gov/web/grants/view-opportunity.html?oppId=277272>

**Uncovering the Causes, Contexts, and Consequences of Elder Mistreatment (R01) – DHHS, NIH**

**DEADLINE:** Oct 20, 2017

**AMOUNT:** \$300,000

**DESCRIPTION:** The purpose of this Funding Opportunity Announcement is to solicit applications proposing research that can lead to advancements in the understanding of elder mistreatment (emotional abuse, physical abuse, and sexual abuse; financial exploitation; abandonment; and neglect) and lay the foundation for the future design of mechanistically focused interventions for individuals at risk for mistreating elders, for promoting recovery and resilience in the maltreated and their families, and for preventing re-perpetration for those who have inflicted harm. Applications are solicited from multidisciplinary teams which include researchers from the fields of elder mistreatment, child abuse and neglect, intimate partner violence, and/or emergency medicine to pursue research in two priority areas: (1) the development of new and innovative tools and methods for the screening and detection of elder mistreatment; and (2) the identification of modifiable risk factors for elder mistreatment and modifiable protective factors, with potential to prevent maltreatment and/or enable individuals who have been mistreated and those who have mistreated others to overcome adversity and thrive. All applications should propose evidence-based strategies for addressing ethical challenges surrounding informed consent and study design in the research proposed, and to employ, when possible, best practices established in the fields of child abuse and neglect and/or intimate partner violence.

**WEBSITE/LINK:** <https://grants.nih.gov/grants/guide/rfa-files/RFA-AG-18-010.html>

**(COMMUNITY)**

**GARDEN GRANTS**

**DEADLINE:** The online application process opens August 21, 2017 and will close October 8, 2017 at 11:59pm ET. Email [birdsleuth@cornell.edu](mailto:birdsleuth@cornell.edu) with any questions.

Join BirdSleuth staff for our free webinar “Starting a School Garden for Birds” this September. We will spend part of the webinar discussing the garden grant application.

The application is open to all K-12 schools, public and private, within the United States. Homeschool families, daycare facilities, and informal education settings such as nature centers and museums are not eligible. We cannot support U.S. territories at this time.

**AMOUNT:** Grants range from \$500-\$2,000. You may not receive the amount you request. Grants will be based on need and impact.



## NORTHWEST PORTLAND AREA INDIAN HEALTH BOARD



\$\$\$ ~ Weekly Funding Opportunities Report ~ \$\$\$

Friday, September 29, 2017

**DESCRIPTION:** School gardens provide an exciting context for cross-disciplinary learning and a wonderful opportunity to engage students in hands-on activities, project-based learning, and citizen science. Kids benefit from gardens in academic, physical, emotional, social, and behavioral ways. We are excited to support teachers' efforts to engage kids in outdoor learning and all its benefits!

We will award 20 grants to teachers within the United States who strive to take the classroom outside, reconnect students with the natural world, and teach them valuable concepts and skills that integrate across all subjects. In partnership with our amazing sponsor, Alaska Fertilizer, we're thrilled to support 20 teachers with a \$500-\$2,000 grant, gardening supplies, and BirdSleuth's Habitat Connections kit. Funds can support a new garden or the revitalization of an existing one. In addition to funding food/veggie gardens, preference will be given to bird, pollinator, native habitat, rain, and other natural projects.

**WEBSITE/LINK:** <http://www.birdsleuth.org/garden-grants/>

### NEA Foundation Invites Applications for Learning and Leadership Grants

**DEADLINE:** October 15, 2017

**AMOUNT:** Grant amounts are \$2,000 for individuals and \$5,000 for groups engaged in collegial study. All group grant applicants must include partner information.

**DESCRIPTION:** The NEA Foundation, the philanthropic arm of the National Education Association, is a public charity supported by contributions from educators' dues, corporate sponsors, and others. The foundation supports student success by helping public school educators work with key partners to build strong systems of shared responsibility.

As part of an effort to achieve this goal, the foundation is inviting applications for its Learning and Leadership Grants program. The program provides support to public school teachers, public education support professionals, and/or faculty and staff in public institutions of higher education through grants to individuals to fund participation in high-quality professional development experiences such as summer institutes or action research; or grants to groups to fund collegial study, including study groups, action research, lesson study, or mentoring experiences for faculty or staff new to an assignment.

To be eligible, applicants must be a public school educator in grades pre-K-12; a public school education support professional; or a faculty or staff member at a public institution of higher education. The foundation encourages education support professionals to apply. Preference will be given to members of the National Education Association.

**WEBSITE/LINK:** <http://www.neafoundation.org/pages/learning-leadership-grants/>

### First Nations Invites Applications for Native Arts Program

**DEADLINE:** October 19, 2017

**AMOUNT & DESCRIPTION:** First Nations will award about fifteen grants of up to \$32,000 to Native-controlled nonprofit organizations and tribal governments that have programs in place that support Native artists and the field of traditional Native arts, as well as a demonstrated commitment to increasing the intergenerational transfer of knowledge of traditional Native artistic practices and the perpetuation of traditional Native arts.



Friday, September 29, 2017

WEBSITE/LINK: <http://www.firstnations.org/grantmaking/2017NAI>

## State Farm Companies Foundation Invites Applications for 2018 Grants Program

**DEADLINE:** October 31, 2017

**AMOUNT:** To advance this mission, the foundation is accepting applications from nonprofit organizations for its Good Neighbor Citizenship Company Grants program, which supports safety, education, and community-development programs around the country.

- 1) Safety: Grants of up to \$5,000 will be awarded to programs that promote auto and roadway safety, teen driver education, home safety and fire prevention, and disaster preparedness and recovery.
- 2) Education: Grants of up to \$5,000 will be awarded to programs that advance teacher development, service-learning, and education reform/systemic improvement.
- 3) Community Development: Grants of up to \$5,000 will be awarded to programs related to affordable housing, job training, neighborhood revitalization, small business development, financial literacy, and first-time homeownership.

**DESCRIPTION:** The State Farm Companies Foundation values inclusiveness and diversity. To that end, its charitable funding is intended to advance access, equity, and inclusiveness while discouraging harmful discrimination based on age, political affiliation, race, national origin, ethnicity, gender, disability, sexual orientation or gender identity, or religious beliefs.

WEBSITE/LINK: <https://www.statefarm.com/about-us/community/education-programs/grants-scholarships/company-grants>

## **2017 NOVEMBER**

### Group Foundation for Advancing Mental Health Research Grant Application

**DEADLINE:** The deadline for receipt of research grant application materials is November 1. Email submission is preferred; application materials should be sent to the Group Foundation at [dfeirman@agpa.org](mailto:dfeirman@agpa.org). If mailed, one copy should be sent to the Group Foundation for Advancing Mental Health at 25 East 21st Street, 6th Floor, New York, NY 10010. The application form may be reproduced in word with electronic signature, scanned and emailed, faxed or mailed.

**AMOUNT:** Grants are typically awarded at \$2,500-\$15,000 depending on the importance of the research to the field, the experience of the investigative team and the number of research applications received. Grant funding can be used to support the basic costs of research, e.g., supplies, research equipment, photocopying, postage, computer services, statistical consultation and research assistant salaries; investigator salaries and travel expenses are not funded. (Equipment purchased for use with a research project is to be donated to an institution at the completion of the project.) Grant monies are awarded with an expected completion of the project in one year as follows: fifty percent upon grant approval, forty percent upon submission of a six month progress report and the final ten percent upon receipt of a post project report.





Friday, September 29, 2017

**DESCRIPTION:** Funds are available from the Group Foundation for Advancing Mental Health to support research that demonstrates the effectiveness of group psychotherapy. The Group Psychotherapy Foundation is seeking research-focused, rather than program-focused, applications.

**WEBSITE/LINK:** <http://www.agpa.org/Foundation/research-grants>

**Addressing Suicide Research Gaps: Understanding Mortality Outcomes (R01)-  
Department of Health and Human Services/National Institutes of Health**

**DEADLINE:** Nov 02, 2017

**AMOUNT:** \$300,000

**DESCRIPTION:** This funding opportunity announcement (FOA) seeks to support efforts focused on linking pertinent data from healthcare system records (e.g., suicide attempt events) to mortality data so that a more accurate understanding of the risk factors for, and the burden of, suicide among those seen in structured healthcare settings can be discerned. Specifically, data are needed on the type, severity, and timing of suicide predictors in the U.S. In addition to improving our national knowledge of the burden of suicide, these data offer the hope of yielding essential benchmarks for both public and private care providers/insurers, who increasingly will be seeking improvements to reduce the frequency of suicide events in their systems. Projects supported by this FOA will help address gaps identified in the 2014 Prioritized Research Agenda for Suicide Prevention.

**WEBSITE/LINK:** <https://grants.nih.gov/grants/guide/rfa-files/RFA-MH-18-410.html>

### 2018 RWJF Culture of Health Prize

**DEADLINE:** Phase I applications must be received no later than November 3, 2017. Upon review, invitations will be extended to select communities to submit Phase II applications by December 8, 2017.

**AMOUNT:** Up to ten communities will be awarded a \$25,000 cash prize and have their accomplishments celebrated and shared broadly, with the goal of raising awareness and inspiring locally driven change across the country. Community partners can decide together how to use the funds to benefit the community.

For the sake of the program, a community is defined as a town, city, county, tribe or tribal community, or region. Each community, should it win, will be required to designate a local U.S. governmental or tax-exempt public charity operating in its community to accept the \$25,000 prize on the community's behalf.

**DESCRIPTION:** The Robert Wood Johnson Foundation has issued a Call for Applications for its 2018 Culture of Health Prize, an annual program that honors outstanding community efforts and partnerships that are helping people live healthier lives.

The RWJF Culture of Health Prize is a place-based prize that honors entire communities; applications representing the work of a single organization or initiative will not be considered.

**WEBSITE/LINK:** <http://www.rwjf.org/en/library/funding-opportunities/2017/chr-prize6.html>



Friday, September 29, 2017

## Re-Competition of Global Network for Women's and Children's Health Research (UG1)

**DEADLINE:** Letter of Intent Due Date(s) 30 days prior to the application due date. November 27, 2017, by 5:00 PM local time of applicant organization. All types of non-AIDS applications allowed for this funding opportunity announcement are due on this date.

**AMOUNT:** Applications for the RUs may request a budget for direct costs of up to \$155,000 per year for RU base costs and \$410,000 direct costs under Other Expenses as restricted funds, to be used for multiple protocols including a maternal neonatal health registry. Application budgets need to reflect actual needs of the proposed budget.

The number of awards is contingent upon NIH appropriations and the submission of a sufficient number of meritorious applications.

NICHD intends to commit approximately \$4.8 million in total costs (direct plus Facilities and Administrative (F&A) costs) in FY 2018 to fund new and/or renewal awards.

Each RU applicant may request a project period of up to five years.

**DESCRIPTION:** This funding opportunity announcement (FOA) invites applications from U.S. institutions to support Research Units (RUs) within the Global Network for Women's and Children's Health Research at NICHD. RUs will consist of U.S.-based research centers applying in partnership with research centers in low income countries as defined by the World Bank. The RUs within the Global Network will participate in addressing the major causes of maternal, neonatal, infant, and early childhood morbidity and mortality through the conduct of clinical research. The grantees will become part of a cooperative network in scientific partnership with the NIH to conduct multi-enter observational studies and randomized clinical trials evaluating disease process, health and wellness outcomes, and results from interventions in resource-poor settings.

**WEBSITE/LINK:** <https://grants.nih.gov/grants/guide/rfa-files/RFA-HD-18-009.html>

### **(COMMUNITY)**

#### **Infrastructure For Rebuilding America (INFRA) Grants Program**

**DEADLINE:** Tribal or Tribal Consortium governments may apply directly. Applications must be submitted by November 2, 2017. **For information on how to apply, see page 2 of the NOFO**

**AMOUNT:** The new INFRA program preserves the statutory requirement to award at least 25% of funding for rural projects. For rural communities in need of funding for highway and multimodal freight projects with national or regional economic significance, INFRA is an opportunity to apply directly for financial assistance from the federal government. For these communities, DOT will consider an applicant's resource constraints when assessing the leverage criterion.

**DESCRIPTION:** The INFRA program will make approximately \$1.5 billion available to projects that are in line with the Administration's principles to help rebuild America's crumbling infrastructure which is a top priority for the Trump Administration. INFRA improves a pre-existing grant program established in the FAST Act of 2015 and utilizes updated criteria to evaluate projects that align national and regional economic vitality and



Friday, September 29, 2017

leverage more non-federal funding. The new program will grow the impact of projects by leveraging more capital and allowing innovation in the project delivery and permitting process. INFRA will also target performance and accountability in project execution.

**WEBSITE/LINK:** <https://www.transportation.gov/buildamerica/infragrants>

### **Hazard Mitigation Assistance Grant – FEMA**

**DEADLINE:** All applications must be submitted no later than 3 p.m. Eastern Daylight Time (EDT) on Nov. 14, 2017.

**AMOUNT:** Community flood mitigation advance assistance and projects up to \$70 million.

a. Advance assistance sub-applications not to exceed \$100,000 federal share for flood mitigation design up to \$2 million; and,

b. Community flood mitigation project sub applications not to exceed \$10,000,000 federal share per sub application up to the total remaining.

**DESCRIPTION:** The PDM Program, authorized by Section 203 of the Robert T. Stafford Disaster Relief and Emergency Assistance Act, is designed to assist States, U.S. Territories, Federally-recognized tribes, and local communities in implementing a sustained pre-disaster natural hazard mitigation program. The goal is to reduce overall risk to the population and structures from future hazard events, while also reducing reliance on Federal funding in future disasters. This program awards planning and project grants and provides opportunities for raising public awareness about reducing future losses before disaster strikes. Mitigation planning is a key process used to break the cycle of disaster damage, reconstruction, and repeated damage. PDM grants are funded annually by Congressional appropriations and are awarded on a nationally competitive basis.

FEMA requires state, territorial, tribal, and local governments to develop and adopt hazard mitigation plans as a condition for receiving certain types of non-emergency disaster assistance, including funding for PDM mitigation projects. For more information on the mitigation plan requirement, visit the Hazard Mitigation Plan Requirement web page or refer to the current HMA Guidance for detailed information on the PDM Program.

Project subapplications submitted for consideration for PDM funding must be consistent with the goals and objectives identified in the current, FEMA-approved State or Tribal (Standard or Enhanced) hazard mitigation plan along with the local or tribal hazard mitigation plan for the jurisdiction in which the activity is located.

Planning subapplications submitted for consideration for PDM funding must result in a mitigation plan adopted by the jurisdiction(s) and approved by FEMA. PDM funds mitigation planning to help States, U.S. Territories, Federally-recognized tribes and local governments engage in a planning process that meets the requirements outlined in 44 CFR Part 201 Mitigation Planning. For more information on FEMA's mitigation planning program, laws, regulation, policies, resources, and training, visit FEMA's Hazard Mitigation Planning Resources web page.

**WEBSITE/LINK:** <https://www.fema.gov/pre-disaster-mitigation-grant-program>



NORTHWEST PORTLAND AREA INDIAN HEALTH BOARD



\$\$\$ ~ Weekly Funding Opportunities Report ~\$\$\$

Friday, September 29, 2017

**Inclusion across the Nation of Communities of Learners of Underrepresented Discoverers in Engineering and Science- National Science Foundation**

**DEADLINE:** Nov 27, 2017

**AMOUNT:** \$10,500,000

**DESCRIPTION:** Inclusion across the Nation of Communities of Learners of Underrepresented Discoverers in Engineering and Science (NSF INCLUDES) is a comprehensive national initiative designed to enhance U.S. leadership in science, technology, engineering and mathematics (STEM) discoveries and innovations focused on NSF's commitment to diversity, inclusion, and broadening participation in these fields. The initiative is developing a National Network composed of NSF INCLUDES Design and Development Launch Pilots, NSF INCLUDES Alliances, NSF-funded broadening participation projects, other relevant NSF-funded projects, scholars engaged in broadening participation research, and other organizations that support the development of talent from all sectors of society to build the STEM workforce. To facilitate the Networks operation, the program is soliciting proposals for a NSF INCLUDES Coordination Hub that will drive and support the work of the NSF INCLUDES National Network over the lifecycle of the initiative by: (a) promoting the NSF INCLUDES guiding vision and strategy; (b) developing a collaborative infrastructure to support the activities of the various entities partnering in the NSF INCLUDES National Network; (c) fostering progress among Network partners toward shared models, measurement practices, and evaluation criteria; (d) communicating the discoveries of and generating enthusiasm for the NSF INCLUDES National Network; and (e) advancing the expansion and scale of the NSF INCLUDES National Network by connecting expertise from multiple sectors and other private and public funders. The three critical functions of the NSF INCLUDES Coordination Hub are summarized below: 1. Communication and Networking: From the beginning the NSF INCLUDES Coordination Hub should direct efforts toward building the Network infrastructure by facilitating continuous communication and information updates, designing community activities, and fostering collaboration across all elements of the Network. 2. Network Assistance and Reinforcement: As NSF INCLUDES Alliances and other organizations join the NSF INCLUDES National Network, the NSF INCLUDES Coordination Hub should focus attention on assistance and reinforcement activities including technical assistance, conducting research, and facilitating shared measurement and data analysis across the Network. 3. Visibility and Expansion: The NSF INCLUDES Coordination Hub should provide resources for efforts to focus on expansion and sustainability within the National Network, increase NSF INCLUDES visibility and communicate impact, while also serving as a repository for funding opportunities, research and knowledge generated by the NSF INCLUDES National Network and stakeholders.

**WEBSITE/LINK:** <https://www.grants.gov/web/grants/view-opportunity.html?oppId=296685>



Friday, September 29, 2017

**2017 DECEMBER**

## **Alliances for Graduate Education and the Professoriate - National Science Foundation**

**DEADLINE:** Dec 08, 2017

**AMOUNT:** \$2,000,000

**DESCRIPTION:** The Alliances for Graduate Education and the Professoriate (AGEP) program seeks to advance knowledge about models to improve pathways to the professoriate and success for historically underrepresented minority doctoral students, postdoctoral fellows and faculty, particularly African Americans, Hispanic Americans, American Indians, Alaska Natives, Native Hawaiians, and Native Pacific Islanders, in specific STEM disciplines and/or STEM education research fields. New and innovative models are encouraged, as are models that reproduce and/or replicate existing evidence-based alliances in significantly different disciplines, institutions, and participant cohorts. The AGEP program goal is to increase the number of historically underrepresented minority faculty, in specific STEM disciplines and STEM education research fields, by advancing knowledge about pathways to career success. The program objectives include: To support the development, implementation and study of innovative models of doctoral education, postdoctoral training, and faculty advancement for historically underrepresented minorities in specific STEM disciplines and/or STEM education research fields; and to advance knowledge about the underlying issues, policies and practices that have an impact on the participation, transitions and advancement of historically underrepresented minorities in the STEM academy. The AGEP Transformation Alliance projects are collaborative research projects representing new strategic alliances of institutions and organizations to develop, implement, and study evidence-based models to transform doctoral education, postdoctoral training, and faculty advancement for historically underrepresented minorities in specific STEM disciplines and/or STEM education research fields. Embedded social science and education research contributes to the knowledge base about how transformational models eliminate or mitigate negative factors and promote positive policies and practices for historically underrepresented minorities. AGEP addresses academic workforce development in a broadening participation and institutional capacity building context. Strategic collaborations are encouraged with multiple academic partners, the private sector, non-governmental organizations, professional organizations, government agencies, national laboratories, field stations, teaching and learning centers, informal science centers, and other relevant STEM and/or STEM education research organizations. The AGEP program encourages project leadership by, and partnerships with, all types of minority serving institutions, such as majority minority serving institutions, historically black colleges and universities, high Hispanic enrollment institutions, tribal colleges and universities, and institutions serving native Hawaiians, native Pacific Islanders, and/or Alaskan natives. Note to students and postdoctoral scholars seeking support: The AGEP program does not make awards to individual students or postdoctoral scholars to undertake their education or research activities. Undergraduates and graduate students seeking support for graduate education should review the NSF Graduate Research Fellowship program (GRFP) (<http://nsfgrfp.org/>). Postdoctoral scholars seeking support should review the NSF postdoctoral programs summarized at [www.fastlane.nsf.gov/servlet/fastlane.pdoc.DisplayProgramType](http://www.fastlane.nsf.gov/servlet/fastlane.pdoc.DisplayProgramType). Additionally, some NSF Directorates may have special funding opportunities to support students and postdoctoral



Friday, September 29, 2017

trainees that contribute to broadening participation in STEM. NSF principal investigators seeking funds to support students and postdoctoral trainees, who are members of historically underrepresented minority groups, are encouraged to contact their NSF program officer for information on potential opportunities.

**WEBSITE/LINK:**

[https://www.nsf.gov/publications/pub\\_summ.jsp?ods\\_key=nsf16552](https://www.nsf.gov/publications/pub_summ.jsp?ods_key=nsf16552)

**W81XWH-17-BCRP-BREAKTHROUGH2-FL34 DoD Breast Cancer, Breakthrough Award Levels 3 & 4 Department of Defense/Dept. of the Army -- USAMRAA**

**DEADLINE:** Dec 21, 2017

**AMOUNT:** \$2,500,000

**DESCRIPTION:** The intent of the Breakthrough Award is to support promising research that has high potential to lead to or make breakthroughs in breast cancer. The critical components of this award mechanism are: Impact: Research supported by the Breakthrough Award will have the potential for a major impact and accelerate progress toward ending breast cancer. The impact may be near-term or long-term, but must be significant and move beyond an incremental advancement. Applications must articulate the pathway to making a clinical impact for individuals with, or at risk for, breast cancer, even if clinical impact is not an immediate outcome. Research Scope: Research proposed under this award mechanism may be small- to large-scale projects, at different stages of idea and research development. Two different funding levels, based on the scope of the research, are available under this Program Announcement. The current Program Announcement discusses Funding Levels 3 and 4. Funding Levels 1 and 2 will be available under a different Program Announcement (W81XWH-17-BCRP- BREAKTHROUGH2-FL12). It is the responsibility of the Principal Investigator (PI) to select the funding level that is most appropriate for the research proposed. The funding level should be selected based on the scope of the research project, rather than the amount of the budget. The following are general descriptions, although not all-inclusive, of the scope of research projects that would be appropriate to propose under each funding level: •Funding Level 3: Advanced translational studies that have potential for near-term clinical investigation. Small-scale clinical trials may apply. • Funding Level 4: Large-scale projects that will transform and revolutionize the clinical management and/or prevention of breast cancer. Near-term clinical impact is expected. Human clinical testing is required. PIs are expected to have experience in successfully leading large-scale projects. Partnering PI Option: The Breakthrough Award encourages applications that include meaningful and productive collaborations between investigators. The Partnering PI Option is structured to accommodate two PIs, referred to as the Initiating PI and the Partnering PI, each of whom will receive a separate award. The Initiating and Partnering PIs have different submission requirements; however, both PIs should contribute significantly to the development of the proposed research project including the Project Narrative, Statement of Work, and other required components. The PIs may have expertise in similar or disparate scientific disciplines, but each PI is expected to bring distinct contributions to the application. New collaborations are encouraged, but not required. It is the responsibility of the PIs to describe how their combined expertise will better address the research question and explain why the work should be done together rather than through separate efforts. To meet the intent of the Partnering PI Option, applicants are discouraged from submitting as a Partnering PI on multiple Breakthrough Award Levels 3 and 4 applications unless they



Friday, September 29, 2017

are clearly addressing distinct research questions. Applications submitted by a mentor and his/her current postdoctoral fellow or junior investigator as Initiating and Partnering PIs do not meet the intent of the Partnering PI Option. Personnel: PIs are expected to engage and assemble an appropriate and robust research team with the combined backgrounds and breast cancer-related expertise to enable successful conduct of the project. Consumer Advocates: Applications are required to include consumer advocate involvement. The research team must include two or more breast cancer consumer advocates, who will be integral throughout the planning and implementation of the research project. Consumer advocates should be involved in the development of the research question, project design, oversight, recruitment, and evaluation, as well as other significant aspects of the proposed project. Interactions with other team members should be well integrated and ongoing, not limited to attending seminars and semi-annual meetings. As lay representatives, the consumer advocates must be individuals who have been diagnosed with breast cancer, and they should be active in a breast cancer advocacy organization. Their role in the project should be independent of their employment, and they cannot be employees of any of the organizations participating in the application. Their role should be focused on providing objective input on the research and its potential impact for individuals with, or at risk for, breast cancer. The consumer advocates should have a high level of knowledge of current breast cancer issues and the necessary background or training in breast cancer research to contribute to the project.

**WEBSITE/LINK:** <https://www.grants.gov/web/grants/view-opportunity.html?oppId=296274>

**2018**

### **Emergency Medicine Residents' Association Seek Applications for Local Action Grants**

**DEADLINE:** January 15, 2018

**AMOUNT:** Two \$1,000 grants will be awarded to projects related to improving community health through education, direct services, or preventive programs (e.g., developing a local bicycle helmet education program); supporting the specialty of emergency medicine through community awareness, advocacy of local and state medical societies, or involvement with local and state government; and/or improving opportunities for resident education and interaction on the residency, state, or regional level (e.g., travel honorariums for speakers or the development of a regional EM resident conference).

**DESCRIPTION:** The Emergency Medicine Residents' Association is accepting applications from projects that promote the involvement of emergency medicine residents in community service and other activities that support the specialty of emergency medicine.

Any EMRA member (medical students, residents, fellows) or any emergency medicine interest group whose principal applicant is an EMRA member is eligible to apply.

See the EMRA website for complete program guidelines, information about previously funded projects, and application instructions.

**WEBSITE/LINK:** <https://www.emra.org/content.aspx?id=177>



NORTHWEST PORTLAND AREA INDIAN HEALTH BOARD



\$\$\$ ~ Weekly Funding Opportunities Report ~\$\$\$

Friday, September 29, 2017

### **ONS Foundation Accepting Applications for End-of-Life Care Nursing Career Development Award**

**DEADLINE:** June 15, 2018

**AMOUNT:** One annual award of up to \$2,000

**DESCRIPTION:** To support continuing educational activities for a registered nurse dedicated to caring for patients and their families during the final stages of life. This award *cannot* be used for tuition in an academic program, to attend the ONS Congress or certification.

**WEBSITE/LINK:** <http://www.onsfoundation.org/apply/ed/PatMcCue>

### **NO DEADLINE – GRANT RESOURCE INFORMATION!**

#### **Elizabeth Taylor AIDS Foundation Seeks Applications for HIV/AIDS Programs**

**DEADLINE:** Strategic Funding – Year round by invitation only. (To be eligible, applicant organizations must have at least three years' experience in delivering HIV/AIDS programs.)

**AMOUNT:** One-year grants of up to \$25,000 will be awarded for domestic and international programs that offer direct care services to people living with HIV and AIDS. Online trainings, curriculum development, and website projects will be a secondary priority for funding considerations.

**DESCRIPTION:** The Elizabeth Taylor AIDS Foundation was established by Elizabeth Taylor in 1991 to provide grants to existing organizations for domestic and international programs that offer direct care services to people living with HIV and AIDS. Since its inception, the foundation has concentrated on supporting marginalized communities and has grown to also fund innovative HIV education and advocacy programs. To date, ETAF has awarded grants to more than six hundred and seventy-five organizations in forty-four countries and forty-two states in the United States.

**WEBSITE/LINK:** <http://elizabethtayloraidsfoundation.org/apply/>

#### **Evidence for Action: Investigator-Initiated Research to Build a Culture of Health**

##### **DEADLINE:**

Informational Web Conferences:

Lessons Learned from a Year of Evidence for Action Grant Reviews

February 18, 2016 from 1:30-2:30 p.m. ET (10:30-11:30 a.m. PT)

Registration is required.

Archived Web Conferences

Informational Web Conferences were scheduled for June 3, 2015 and July 22, 2015  
Recordings for both events are now available.





NORTHWEST PORTLAND AREA INDIAN HEALTH BOARD



\$\$\$ ~ Weekly Funding Opportunities Report ~ \$\$\$

Friday, September 29, 2017

June 3, 2015 web conference recording available here.

July 22, 2015 web conference recording available here.

**Timing:** Since applications are accepted on a rolling basis, there is no deadline for submission. Generally, applicants can expect to be notified within 6-8 weeks of their LOI submission. Applicants invited to the full proposal stage will have 2 months to submit their proposal once they receive notification. Full proposal funding decisions will generally be made within 6-8 weeks of the submission deadline.

**AMOUNT:** Approximately \$2.2 million will be awarded annually. We expect to fund between five and 12 grants each year for periods of up to 30 months. We anticipate that this funding opportunity will remain open for at least a period of three years; however, decisions about modifications to the program and the duration of the program will be made by RWJF at its sole discretion.

**DESCRIPTION:** Evidence for Action: Investigator-Initiated Research to Build a Culture of Health is a national program of RWJF that supports the Foundation's commitment to building a Culture of Health in the United States. The program aims to provide individuals, organizations, communities, policymakers, and researchers with the empirical evidence needed to address the key determinants of health encompassed in the Culture of Health Action Framework. In addition, Evidence for Action will also support efforts to assess outcomes and set priorities for action. It will do this by encouraging and supporting creative, rigorous research on the impact of innovative programs, policies and partnerships on health and well-being, and on novel approaches to measuring health determinants and outcomes.

**WEBSITE:** [http://www.rwjf.org/en/library/funding-opportunities/2015/evidence-for-action-investigator-initiated-research-to-build-a-culture-of-health.html?rid=3uOaFeLLcJROtLce2ecBeg&et\\_cid=469879](http://www.rwjf.org/en/library/funding-opportunities/2015/evidence-for-action-investigator-initiated-research-to-build-a-culture-of-health.html?rid=3uOaFeLLcJROtLce2ecBeg&et_cid=469879)

### Changes in Health Care Financing and Organization: Small Grants

**DEADLINE:** Grants are awarded on a rolling basis; proposals may be submitted at any time.

**AMOUNT:** This solicitation is for small grants of \$100,000 or less.

**DESCRIPTION:** Changes in Health Care Financing and Organization (HCFO) supports research, policy analysis and evaluation projects that provide policy leaders timely information on health care policy, financing and organization issues. Supported projects include:

examining significant issues and interventions related to health care financing and organization and their effects on health care costs, quality and access; and

exploring or testing major new ways to finance and organize health care that have the potential to improve access to more affordable and higher quality health services.

### Eligibility and Selection Criteria

Researchers, as well as practitioners and public and private policy-makers working with researchers, are eligible to submit proposals through their organizations. Projects may be initiated from within many disciplines, including health services research, economics,



NORTHWEST PORTLAND AREA INDIAN HEALTH BOARD



\$\$\$ ~ Weekly Funding Opportunities Report ~\$\$\$

Friday, September 29, 2017

sociology, political science, public policy, public health, public administration, law and business administration. RWJF encourages proposals from organizations on behalf of researchers who are just beginning their careers, who can serve either individually as principal investigators or as part of a project team comprising researchers or other collaborators with more experience. Only organizations and government entities are eligible to receive funding under this program.

Preference will be given to applicants that are either public entities or nonprofit organizations that are tax-exempt under Section 501(c) (3) of the Internal Revenue Code and are not private foundations as defined under Section 509(a).

Complete selection criteria can be found in the Call for Proposals.

**WEBSITE:** <http://www.rwjf.org/en/grants/funding-opportunities/2011/changes-in-health-care-financing-and-organization--small-grants.html>

### The National Children's Alliance

**Deadline:** <http://www.nationalchildrensalliance.org/>

**Amount:** See website

**Description:** The National Children's Alliance has a Request for proposals to help support the development of CACs and Multidisciplinary Teams. NACA encourages all tribal communities to apply. They can offer FREE technical support to help you with your application.

### ➤ Common Wealth Fund

The Commonwealth Fund encourages and accepts unsolicited requests on an ongoing basis. The Fund strongly prefers grant applicants to submit letters of inquiry using the online application form. Applicants who choose to submit letters of inquiry by regular mail or fax should provide the information outlined in a two- to three-page document.

They fund:

- Delivery System Innovation and Improvement
- Health Reform Policy

### ➤ Health System Performance Assessment and Tracking

<http://www.commonwealthfund.org/Grants-and-Programs/Letter-of-Inquiry.aspx>

### ➤ Kaboom! Invites Grant Applications to Open Previously Unavailable Playgrounds

**Deadline:** KaBOOM! is inviting grant applications from communities anywhere in the United States working to establish joint use agreements to re-open playground and recreational facilities previously unavailable due to safety and upkeep concerns. (No specific deadline.)

**Amount:** Let's Play Land Use grants of \$15,000 and \$30,000 will support creation of joint-use agreements between local governments and school districts that address cost concerns related to safety, vandalism, maintenance, and liability issues to re-open previously



NORTHWEST PORTLAND AREA INDIAN HEALTH BOARD



\$\$\$ ~ Weekly Funding Opportunities Report ~\$\$\$

Friday, September 29, 2017

unavailable playgrounds and recreational facilities.

The \$15,000 grants will support the opening of at least four playgrounds in cities with populations of less than 100,000 people. The \$30,000 grants will support the opening of at least eight playgrounds in larger communities.

**Description:** Grants can be used for training and technical assistance, utilities and other building related to the extra use of the facility, legal fees, contract security

services, and marketing campaigns related to the joint-use agreement. Grant recipients must commit to opening the playgrounds within twelve months of the grant decision.

Complete grant application guidelines are available on the KaBOOM! website:

[http://kaboom.org/about\\_kaboom/programs/grants?utm\\_source=direct&utm\\_medium=surl](http://kaboom.org/about_kaboom/programs/grants?utm_source=direct&utm_medium=surl)

➤ **Meyer Memorial Trust**

**Deadline:** Monthly (Except January, April and August)

**Amount:** Range generally from \$40,001 to \$300,000 with grant periods from one to two (and occasionally three) years.

**Description:** Responsive Grants are awarded for a wide array of activities in the areas of human services, health, affordable housing, community development, conservation and environment, public affairs, arts and culture and education. There are two stages of consideration before Responsive Grants are awarded. Initial Inquires are accepted at any time through MMT's online grants application. Applicants that pass initial approval are invited to submit full proposals. The full two-step proposal investigation usually takes five to seven months. <http://www.mmt.org/program/responsive-grants>

➤ **Kellogg Foundation Invites Applications for Programs that Engage Youth and Communities in Learning Opportunities**

**Deadline:** No Deadline

**Amount:** No Amount Specified

**Description:** The W.K. Kellogg Foundation is accepting applications from nonprofit organizations working to promote new ideas about how to engage children and youth in learning and ways to bring together community-based systems that promote learning. The foundation will consider grants in four priority areas: Educated Kids; Healthy Kids; Secure Families; and Civic Engagement.

**Educated Kids:** To ensure that all children get the development and education they need as a basis for independence and success, the foundation seeks opportunities to invest in early child development (ages zero to eight) leading to reading proficiency by third grade, graduation from high school, and pathways to meaningful employment.



NORTHWEST PORTLAND AREA INDIAN HEALTH BOARD



\$\$\$ ~ Weekly Funding Opportunities Report ~\$\$\$

Friday, September 29, 2017

**Healthy Kids:** The foundation supports programs that work to ensure that all children grow and reach optimal well-being by having access to fresh, healthy food, physical activity, quality health care, and strong family supports.

**Secure Families:** The foundation supports programs that build economic security for vulnerable children and their families through sustained income and asset accumulation.

**Civic Engagement:** The foundation partners with organizations committed to inclusion, impact, and innovation in solving public problems and meeting the needs of children and families who are most vulnerable.

See the Kellogg Foundation Web site for eligibility and application guidelines.

[http://foundationcenter.org/pnd/rfp/rfp\\_item.jhtml?id=411900024#sthash.8WbcfRk.dpuf](http://foundationcenter.org/pnd/rfp/rfp_item.jhtml?id=411900024#sthash.8WbcfRk.dpuf)

• **W.K. Kellogg Foundation**

**Deadline:** The Kellogg Foundation does not have any submission deadlines. Grant applications are accepted throughout the year and are reviewed at their headquarters in Battle Creek, Michigan, or in our regional office in Mexico (for submissions focused within their region).

**Amount: NO LIMIT (Please read restrictions/What they won't fund.)**

**Description:** What to Expect Once they receive your completed online application, an automated response, which includes your WKKF reference number, will be sent to you acknowledging its receipt. Their goal is to review your application and email their initial response to you within 45 days. Your grant may be declined or it may be selected for further development.

As part of review process you may be asked to submit your organization's financial reports and/or IRS Form 990. While this information may be required, it is not intended to be the overall determining factor for any funding. You will not be asked to provide any financial reports or detailed budget information during this initial submission. They will only request this information later if needed as part of the proposal development.

If you would like to speak with someone personally, please contact the Central Proposal Processing department at (269) 969-2329. <http://www.wkkf.org/>

✚ **AHRO Research and Other Activities Relevant to American Indians and Alaska Natives**

<http://www.ahrq.gov/research/findings/factsheets/minority/amindbrf/index.html>

**Community Grant Program- WALMART**

**DEADLINE:** The 2016 grant cycle begins Feb. 1, 2016 and the application deadline to apply is Dec. 31, 2016. **Application may be submitted at any time during this funding cycle. Please note that applications will only remain pending in our system for 90 days.**

**AMOUNT:** Awarded grants range from \$250 to \$2,500.



NORTHWEST PORTLAND AREA INDIAN HEALTH BOARD



\$\$\$ ~ Weekly Funding Opportunities Report ~\$\$\$

Friday, September 29, 2017

**DESCRIPTION:** Through the Community Grant Program, our associates are proud to support the needs of their communities by providing grants to local organizations.

**WEBSITE:** <http://giving.walmart.com/apply-for-grants/local-giving>

**SCHOLARSHIP:**

**The Meyerhoff Adaptation Project -**

The Meyerhoff Scholars Program is open to all high-achieving high school seniors who have an interest in pursuing doctoral study in the sciences or engineering, and who are interested in the advancement of minorities in the sciences and related fields. Students must be nominated for the program and are most typically nominated by their high school administrators, guidance counselors, and teachers. Awards range from \$5,000 – \$22,000 per year for four years.

The Meyerhoff Selection Committee considers students academic performance, standardized test scores, recommendation letters, and commitment to community service. Scholars are selected for their interests in the sciences, engineering, mathematics, or computer science, as well as their plans to pursue a Ph.D. or combined M.D./Ph.D. in the sciences or engineering. Reviewing the freshman class profile may provide an idea of the kinds of students who are admitted to UMBC and the Meyerhoff Scholars Program.

Applicants are expected to have completed a strong college preparatory program of study from an accredited high school. The minimum program of study should include:

English: four years

Social Science/History: three years

Mathematics\*: three years

Science: three years

Language other than English: two years

\*Students are strongly recommended to have completed four years of mathematics, including trigonometry, pre-calculus, and/or calculus.

**Eligibility Criteria**

To be considered for the Meyerhoff Scholars Program, prospective students must have at least a “B” average in high school science or math courses, and many applicants have completed a year or more of calculus. Preference is given to those who have taken advanced placement courses in math and science, have research experience, and have strong references from science or math instructors. In recent years, a strong preference has been given to those students interested in the Ph.D. or M.D./Ph.D. (over the M.D.).

Students must meet all eligibility requirements:

Minimum of 600 on the Math component of the SAT

Cumulative High School GPA of a 3.0 or above



NORTHWEST PORTLAND AREA INDIAN HEALTH BOARD



\$\$\$ ~ Weekly Funding Opportunities Report ~\$\$\$

Friday, September 29, 2017

Aspire to obtain a Ph.D. or M.D./Ph.D. in Math, Science, Computer Science, or Engineering

Display commitment to community service

Must be a citizen or permanent resident of the United States

**WEBSITE:**

<http://meyerhoff.umbc.edu/how-to-apply/benefits-and-eligibility/>

**~ONLY FOR WASHINGTON STATE UNIVERSITY~**

**First Scholars – The Suder Foundation**

**DEADLINE:**

**AMOUNT:** The goal of the First Scholars program is to help first-generation college students succeed in school, graduate, and have a life complete with self-awareness, success and significance. Scholars receive personalized support, including a four-year renewable scholarship of \$5,000. The program is open to incoming first-time, full-time freshmen whose parents have no more than two years of education beyond high school and no post-secondary degree.

**DESCRIPTION:** The First Scholars™ Program is available to incoming first-time, full-time freshmen whose parents have no more than two years of education beyond high school and no post-secondary degree. Participation in First Scholars™ includes a four-year renewable scholarship, half disbursed in the fall semester and half disbursed in the spring semester. Students can receive the award depending on eligibility requirements for a total of 4 years if program requirements are met.

This scholarship is open to Washington residents who enroll at Washington State University - Pullman full-time during the 2016-2017 academic year. The program requires that the recipients live on campus in a specified residence hall for the 2016-2017 academic year, and outside of the family home the following three academic years in order to renew the scholarship.

First-generation students represent a cross-section of America and college campus demographics. First Scholars come from diverse cultural, socioeconomic, geographic and family backgrounds and experiences. First-gen students are found in all departments and colleges of virtually every major public university across the country. Our affiliate universities have an average 30-50% first-gen enrollment and the number keeps rising. However, the average national graduation rate for first-generation students is only 34%, compared with 55% for the general student population.

**WEBSITE:** <http://firstscholars.wsu.edu/>

**Education Award Applications –The American College of Psychiatrists**

**DEADLINE:** June 30

**AMOUNT:** (SEE WEBSITE)

**DESCRIPTION:** The Award for Creativity in Psychiatric Education is open to any creative/innovative program for psychiatric education that has been in operation for at



NORTHWEST PORTLAND AREA INDIAN HEALTH BOARD



\$\$\$ ~ Weekly Funding Opportunities Report ~\$\$\$

Friday, September 29, 2017

least two years, and has been a part of a U.S. or Canadian approved psychiatric residency training program. Trainees may include: medical students, residents, other physicians, allied mental health professionals, or members of the community. The Committee selects an awardee in the fall; all applicants are notified of the Committee's decision by November 15.

**WEBSITE:** <http://www.acpsych.org/awards/education-award-applications-deadline-december-1>

**(Internship Program/Scholarship Opportunities)**

**CDC Undergraduate Public Health Scholars Program (CUPS): A Public Health Experience to Expose Undergraduate and Graduate Students to Minority Health, Public Health and Health Professions/Department of Health and Human Services/Centers for Disease Control - OD**

**DEADLINE:** Jun 19, 2017 Electronically submitted applications must be submitted no later than 5:00 p.m., ET, on the listed application due date.

**AMOUNT:** \$850,000

**DESCRIPTION:** CDC seeks to fund organizations with the ability to reach undergraduate and graduate students, including sexual and gender, people with disabilities, low socioeconomic status (SES) and those from underrepresented racial and ethnic minority populations. The ultimate goal is to increase the diversity of the public health workforce, improve the representation of underrepresented populations in public health, and increase the quality of public health services nationally.

**WEBSITE/LINK:** <http://www.cdc.gov/features/studentopportunities/index.html>

**DIRECTORS OF HEALTH PROMOTION AND EDUCATION (DHPE)-2017 SPRING HEALTH EQUITY INTERNSHIP**

**DEADLINE: & AMOUNT:** For more information, contact Karen Probert at [internship@asphn.org](mailto:internship@asphn.org).

**DESCRIPTION:** DHPE has received supplemental funding to support the Health Equity Internship for an additional year. The funding is from the Centers of Disease Control and Prevention (CDC) Division for Heart Disease and Stroke Prevention (DHDSPP). The mission of the CDC DHDSPP is to provide public health leadership to improve cardiovascular health for all, reduce the burden, and eliminate disparities associated with heart disease and stroke. DHPE is working with the Association of State Public Health Nutritionists (ASPHN) to administer the Internship Program for the 2017 Spring cohort.

College students selected for these cohorts should be interested in an internship project and placement site that focuses on the following:

Cardiovascular Disease Risks Reduction;

Heart Disease Prevention and Education, including Hypertension and Stroke;

Nutrition and Healthy Eating;



NORTHWEST PORTLAND AREA INDIAN HEALTH BOARD



\$\$\$ ~ Weekly Funding Opportunities Report ~\$\$\$

Friday, September 29, 2017

Physical Activity and/or Obesity. Interested students should mention their proposed internship site within their application.

Preference will be given to undergraduate and graduate students who attend Minority-Serving Institutions (HBCUs, HSIs and Tribal Colleges), are from racial and ethnic populations, and/or have demonstrated interest in working to achieve health equity in minority and underserved communities.

**WEBSITE/LINK:** For more information, contact Karen Probert at [internship@asphn.org](mailto:internship@asphn.org).

### Native Student Travel Scholarships: Connecting STEM and Justice

**DEADLINE:** Apply now for sponsorship to visit Philadelphia and attend the International Association of Chiefs of Police Conference (IACP) on October 21-24, 2017.

**AMOUNT:** Funding includes registration, airfare, lodging, ground transportation, baggage, meals, and incidental expenses. You would fly from your home airport to Philadelphia on October 20, 2017, and return on October 25, 2017. Decision notices will be sent to all applicants by August 30, 2017.

**DESCRIPTION: Are you an American Indian or Alaska Native student in science, tech, engineering, or math (STEM)?**

The National Institute of Justice is looking for five qualified undergrad or grad students to attend this conference, which brings together thousands of professionals from federal, state, local, and tribal organizations.

Attendance will aid you in exploring applications of your STEM training to issues of criminal justice and public safety. You will have the opportunity to interact with scientists and attend panel discussions on the most urgent issues facing communities and innovative, evidence-based solutions.

**WEBSITE/LINK:** [https://nij.gov/topics/tribal-justice/Pages/native-student-travel-scholarships.aspx?utm\\_source=eblast-govdelivery&utm\\_medium=email&utm\\_campaign=adhoc](https://nij.gov/topics/tribal-justice/Pages/native-student-travel-scholarships.aspx?utm_source=eblast-govdelivery&utm_medium=email&utm_campaign=adhoc)

### VETERANS

#### VFW Accepting Applications From Veterans for Emergency Financial Assistance

**DEADLINE:** Open

**AMOUNT:** Grants of up to \$5,000 will be awarded to active and discharged military service members who have been deployed in the last six years and have run into unexpected financial difficulties as a result of deployment or other military-related activity or natural disaster....

**DESCRIPTION:** As the nation's largest organization of combat veterans, we understand the challenges veterans, service members and military families can face and believe that experiencing financial difficulties should not be one of them. That's the premise behind the VFW's Unmet Needs program.





NORTHWEST PORTLAND AREA INDIAN HEALTH BOARD



\$\$\$ ~ Weekly Funding Opportunities Report ~\$\$\$

Friday, September 29, 2017

Unmet Needs is there to help America's service members who have been deployed in the last six years and have run into unexpected financial difficulties as a result of deployment or other military-related activity. The program provides financial aid of up to \$5,000 to assist with basic life needs in the form of a grant -not a loan- so no repayment is required. To further ease the burden, we pay the creditor directly.

Since the program's inception, Unmet Needs has distributed over \$5 million in assistance to qualified military families, with nearly half of those funds going directly toward basic housing needs.

The needs of our veterans, service members and their families should never go unmet. Let us offer you a hand up when you need it!

Please review the Unmet Needs eligibility criteria to see if you or someone you know qualifies for a grant through the Unmet Needs program.

**WEBSITE:**

<http://www.vfw.org/UnmetNeeds/?gclid=CjwKEAiAhPCyBRctwMDS5tzT03gSJADZ8VjRw5RxJw1br5NTowrY1NFzylowGtdvOagXa3LHyYK PRoCB4Hw wcB>

**RWJF: Submit a Pioneering Idea Brief Proposal - Throughout the year, we welcome Pioneering Ideas Brief Proposals that can help us anticipate the future and consider new and unconventional perspectives and approaches to building a Culture of Health.**

**DEADLINE:** Open

**AMOUNT:** See site

**DESCRIPTION:** The goal of the Pioneering Ideas Brief Proposal funding opportunity is to explore; to look into the future and put health first as we design for changes in how we live, learn, work and play; to wade into uncharted territory in order to better understand what new trends, opportunities and breakthrough ideas can enable everyone in America to live the healthiest life possible.

While improving the status quo is vital to the health and well-being of millions of Americans now, the Pioneering Ideas Brief Proposal opportunity reaches beyond incremental changes to explore the ideas and trends that will influence the trajectory and future of health. Ultimately, we support work that will help us learn what a Culture of Health can look like—and how we can get there.

What is a Pioneering Idea?

Good question! We don't want to provide a checklist that limits your thinking—or ours. We do want to give you as clear a picture as we can about the kinds of proposals we hope to see, so you can best assess whether submitting an idea through our Pioneering Ideas Brief Proposal process is the right next step for you. Our application form allows you to introduce your idea; if it seems to be a fit for our portfolio we will reach out for more information.



NORTHWEST PORTLAND AREA INDIAN HEALTH BOARD



\$\$\$ ~ Weekly Funding Opportunities Report ~\$\$\$

Friday, September 29, 2017

We share some examples below of Pioneering Ideas we have funded in the past to give you a sense of where we've been. Keep in mind that ultimately, we need you to challenge us, and to tell us where we should be going and what ideas have the most potential to transform the way we think about health. As you review the examples below, you may notice some shared themes or characteristics which:

Challenge assumptions or long-held cultural practices.

Take an existing idea and give it a new spin—or a novel application.

Offer a new take or perspective on a long-running, perplexing problem.

Apply cutting-edge ideas from other fields to health.

Explore the potential for emerging trends to impact our ability to build a Culture of Health.

**WEBSITE/LINK:** [http://www.rwjf.org/en/how-we-work/submit-a-proposal.html?rid=CR0RfoW1kVrIxFKudcSYjL9Zh7yWU63VdhdaVE2UAc&et\\_cid=639126](http://www.rwjf.org/en/how-we-work/submit-a-proposal.html?rid=CR0RfoW1kVrIxFKudcSYjL9Zh7yWU63VdhdaVE2UAc&et_cid=639126)

**IDAHO & WASHINGTON - ONLY**

**ASPCA Northern Tier Shelter Initiative Coalition Grants**

**DEADLINE:** No Deadline

**AMOUNT:** Grant amounts will vary depending on project. A site visit may be required as part of the review process or as a condition of receiving the grant funds. Consultation services may be offered as part of a grant package.

**DESCRIPTION:** Priority will be given to coalitions working toward long-term, systemic, and sustainable community/regional improvements in animal welfare services. This may include (but not limited to) programs that:

Increase capacity to provide quality animal care and services by:

Improving protocols around vaccination on intake, disease spread prevention, decreased length of stay, physical and behavioral care of sheltered pets

Improving capacity to provide basic health services including spay/neuter and vaccines for animals at risk in the community.

Increase coalition live release rate via:

Fee-waived adoption programs and policies

High-volume adoption events

Foster programs

Relocation initiatives within the seven Northern Tier target states

Decrease shelter intake via:



Friday, September 29, 2017

Lost and found programs

Return to owner in the field

Pet retention assistance, such as safety net programs

Re-homing assistance

**WEBSITE:** <http://aspcapro.org/grant/2016/05/06/aspca-northern-tier-shelter-initiative-coalition-grants>

### **Healthy Native Babies Outreach Stipend Application**

**DEADLINE:** Applications will be accepted on a rolling basis as funds are available.

**AMOUNT:** \$1500

**DESCRIPTION:** The Healthy Native Babies Project, a project of the Eunice Kennedy Shriver National Institute of Child Health and Human Development (NICHD), has created culturally appropriate materials with safe infant sleep messages for American Indian and Alaska Native communities. These materials can be tailored for local communities by selecting various photos, graphic designs, and phrases in Native languages from the Healthy Native Babies Project Toolkit Disk. Outreach stipends are available for printing customized outreach materials to disseminate in your community. Recipients must be from one of the following Indian Health Service (IHS) Areas: Alaska, Bemidji, Billings, Great Plains, and Portland. Information on IHS Areas can be found at: <https://www.ihs.gov/locations/>.

**WEBSITE/LINK:** <http://files.constantcontact.com/913a319f001/8e50ceae-d3be-462e-be3d-3216455225bc.pdf?ver=1470849886000>

### **Good Sports Accepting Applications for Sports Equipment Program**

**DEADLINE:** *ROLLING FUNDING*

**AMOUNT:** While the equipment, apparel, and footwear received through the program are free, recipients are expected to pay shipping and handling costs, which amount to roughly 10 percent of the donation value, with a maximum fee of \$1,500.

**DESCRIPTION:** Good Sports helps lay the foundation for healthy, active lifestyles by providing athletic equipment, footwear, and apparel to disadvantaged young people nationwide. By working closely with teams, coaches, and community leaders across the United States, the organization is able to focus on the respective needs of each individual program and help offset the main factors causing the greatest challenges.

Good Sports is accepting applications from organizations and schools for equipment, apparel, and footwear for a wide range of sports. Organizations that are approved will have access to equipment, apparel, and footwear inventory for a two-year period. During that time, organizations can make up to six separate donation requests — as long as need is well documented, donations will be granted. There is no need to resubmit a full application again during the two-year period.

To be eligible, applicants must directly serve youth between the ages of 3 and 18; serve youth in an economically disadvantaged area; be located in North America (the U.S. and



Friday, September 29, 2017

Canada); and operate an organized sport, recreational activity, or fitness program that offers consistent and structured opportunity for play to large groups of children. Schools must apply as a whole; applications for individual programs within a school will not be considered. Donation requests for short-term events such as sports camps and tournaments or to individual athletes will not be considered.

Applications are reviewed on a rolling basis. It is recommended, however, that organizations apply at least eight weeks prior to the start of their particular season or program to ensure the desired equipment can be accessed and shipped on time.

**WEBSITE/LINK:** <https://www.goodsports.org/apply/>

### Good Sports Accepting Applications for **Athletic Equipment** Grants

**DEADLINE:** *ROLLING FUNDING*

**AMOUNT:** You will be required to sign a release form and pay a shipping and handling fee with each donation. This will always equal 10% of the total retail value of the items; for example, if the total value of your items equals \$2,000, you will be asked to provide \$200, etc.

**DESCRIPTION:** Good Sports in Quincy, Massachusetts, is a nonprofit whose mission is to increase youth participation in sports, recreation, and fitness activities.

To that end, the organization provides sports equipment, apparel, and footwear to youth organizations offering sports, fitness, and recreational programs to youth in need.

To be eligible, organizations must directly serve youth between the ages of 3 and 18 in an economically disadvantaged area; be located in North America (U.S. and Canada); and operate an organized sport, recreational activity, or fitness program that offers consistent and structured opportunity for play to large groups of children. Winning organizations may make up to six equipment requests within a two-year period. Winners will be responsible for operational costs, including equipment shipping, up to \$1,500.

**WEBSITE/LINK:** <http://www.goodsports.org/apply/>

### Voya Foundation Grants

**DEADLINE:** Grant requests are reviewed throughout the year. Grant applicants should check the online system for quarterly deadlines, which are subject to change.

**AMOUNT:** Value of grant requests must be a minimum of \$2,500.

**DESCRIPTION:** The Voya Foundation, the philanthropic arm of Voya Financial, works to ensure that youth are equipped with science, technology, engineering, and math (STEM) expertise and financial knowledge necessary to compete in the twenty-first century workforce and make smart financial decisions that lead to a secure retirement.

To that end, Voya is accepting applications from organizations that provide innovative and experiential K-8 STEM learning opportunities that promote an early interest in STEM career fields and improve teachers' capabilities in STEM; or that provide financial education curriculum to grade 9-12 students focused on navigating major financial



NORTHWEST PORTLAND AREA INDIAN HEALTH BOARD



\$\$\$ ~ Weekly Funding Opportunities Report ~\$\$\$

Friday, September 29, 2017

milestones such as student debt, credit, home ownership, financial products and services/financial capability, and family needs.

1) STEM Education: The foundation supports organizations that fund high-quality experiential STEM learning opportunities for children in grades K-8. Programs are evaluated based on improvements in covered STEM concepts and increased interest in STEM careers generated over the course of the program.

2) Financial Literacy: Voya's financial literacy grants support organizations that provide financial literacy curriculum to students in high school (grades 9-12). Programs must cover student debt, credit, home ownership, investing, and understanding of financial products and services (financial capability), and family financial planning.

To be eligible, applicants must be considered tax exempt under Section 501(c)(3) of the Internal Revenue Code.

**WEBSITE/LINK:** <http://corporate.voya.com/corporate-responsibility/investing-communities/voya-foundation-grants>

**COMMUNITY**

**FY 2017 Economic Development Assistance Programs - Application submission and program requirements for EDA's Public Works and Economic Adjustment Assistance programs. Department of Commerce**

**DEADLINE:** There are no submission deadlines under this opportunity. Proposals and applications will be accepted on an ongoing basis until the publication of a new EDAP NOFA.

**AMOUNT:** \$3,000,000

**DESCRIPTION:** Under this NOFA, EDA solicits applications from applicants in rural and urban areas to provide investments that support construction, non-construction, technical assistance, and revolving loan fund projects under EDA's Public Works and EAA programs. Grants and cooperative agreements made under these programs are designed to leverage existing regional assets and support the implementation of economic development strategies that advance new ideas and creative approaches to advance economic prosperity in distressed communities, including communities and regions that have been impacted, or can reasonably demonstrate that they will be impacted, by coal mining or coal power plant employment loss, or employment loss in the supply chain industries of either. EDA provides strategic investments on a competitive- merit-basis to support economic development, foster job creation, and attract private investment in economically distressed areas of the United States. This EDAP NOFA supersedes the EDAP Federal Funding Opportunity dated December 23, 2016.

**WEBSITE/LINK:** <https://www.grants.gov/web/grants/view-opportunity.html?oppId=294771>



OCT 05 2017

PORTLAND AREA  
INDIAN HEALTH SERVICE  
1414 NW NORTHROP, Suite 800  
PORTLAND, OREGON 97209

Dear Tribal Leaders:

I am writing to seek your input on the Portland Area Office Alcohol and Substance Abuse Program (ASAP) Pool. Established in the late 1990's this pool was developed between multiple Portland Area Tribes. The original purpose pool was to offer Tribes access to this pool for substance use disorder inpatient treatment. Currently, there are 18 Tribes who are contributing to the ASAP Pool at the Portland Area Office for this purpose.

Tribes who have participated have not been accessing the pool at the same rate as in subsequent years due to the inception of the Affordable Care Act. Since the funds have not been fully expended for the last few years the Area has sent the participating Tribes their proportional shares left here via non-recurring contract modifications.

While I can appreciate the initial intent of a local ASAP Pool, the annually recurring ASAP funding has been underutilized due to ACA expansion. I believe this is why these funds remain at the Area Office unspent/untouched. Starting in Fiscal Year 2018, the ASAP funds are single year appropriations. Which means that any remaining funds will be sent to the Tribes as non-recurring at the end of the fiscal year. I feel it may be more efficient for the Tribes to manage on their own. I am considering to dissolve the pool in fiscal year 2018 and distribute to the Tribes as recurring in future years.

Please provide your comments regarding the continued establishment of this pool by November 3, 2017, at the below address. I plan on making a decision on this within 30 days after the comment closing period.

Portland Area ASAP Pool  
Attn: Jonathan Merrell  
Director, Office of Clinical Support  
1414 NW Northrup St., Suite 800  
Portland, OR 97209

Sincerely,

/Dean M. Seyler/

Dean M. Seyler  
Director

**SPECIAL MISSIVE REGARDING 2018 NCVRW COMMUNITY AWARENESS PROJECT FUNDING, Deadline for Applications is October 16, 2017**

The National Association of VOCA Assistance Administrators (NAVAA) has announced the availability of funding for the 2018 National Crime Victims' Rights Week Community Awareness Projects. With support from the Office for Victims of Crime, at least 60 communities will receive up to \$5,000 each to support events and activities to promote public awareness of crime victim rights and available services during National Crime Victims' Rights Week, April 8 – 14, 2018.

Organizations eligible to apply for funding include local victim services providers, community coalitions, prosecutor offices, law enforcement agencies, faith-based organizations and other agencies/organizations interested in promoting crime victims' rights and services. The application deadline is **Monday, October 16, 2017**. NAVAA will also be holding an applicants' webinar on **Wednesday, September 27, 2017** beginning at 4:00 pm Eastern Time. Registration is required by going to: [http://bit.ly/18NCVRW\\_App](http://bit.ly/18NCVRW_App).

Visit the NCVRW CAP website, <http://cap.navaa.org>, for additional information and applications.



**Community Partnership Program**

[KnightCancerCRO@ohsu.edu](mailto:KnightCancerCRO@ohsu.edu)  
(503) 494-1617, select option 6

Greetings!

In an effort to reduce the incidence and burden of cancer across the state of Oregon, OHSU's Oregon Community Cancer Research Collaborative (OR-CCRC – a Cancer Prevention and Control Research Network [CPCRN]) and OHSU Knight Cancer Institute Community Partnership Program (CPP) are announcing a special funding opportunity to increase physical activity in cancer survivors and their friends and family. The project, entitled "**Step It Up! Survivors**" is a statewide effort to implement an evidence-based walking program for cancer survivors and their friends and family members. Through this special funding opportunity, we hope to support Oregon communities to increase social support, improve symptom management and ultimately reduce risk of second cancers through increasing physical activity among cancer survivors, their friends and family.

Eight to ten Oregon community organizations will be recipients of a \$15,000 award to support the implementation of a community walking program for your local cancer survivor communities. The OR-CCRC team will partner closely with community grantees to adapt and implement the proposed walking program to fit the local community and to evaluate the success of the program in engaging these audiences in physical activity and a commitment to staying active.

The Special Funding Opportunity [request for proposals](#) and instructions on how to apply are available on the OHSU Knight Cancer Institute Special Funding Opportunities [website](#).

- Intent to apply forms are due at noon on **October 18, 2017**
- Full proposals are due at noon on **November 1, 2017**

**Continued focus on addressing cancer-related health disparities**

Proposals that address cancer-related health disparities, including disparities related to race, ethnicity, socioeconomic status, gender identity, sexual orientation, geographic



location and disability continue to be highly encouraged.

For questions about eligibility or the application process, please contact the Community Partnership Program team at (503) 494-1617 (option 6) or email [KnightCancerCRO@ohsu.edu](mailto:KnightCancerCRO@ohsu.edu).

For questions about the community walking program, please contact: Mary Medysky at 503-494-4361 or email [medysky@ohsu.edu](mailto:medysky@ohsu.edu).

We hope you will consider submitting a proposal and/or sharing this opportunity with colleagues or community partners who may be interested in applying.

Regards,

**Jackilen Shannon, Ph.D., R.D.**

Professor, School of Public Health

Director, Integrated Program in Community Research

Associate Director, Oregon Clinical and Translational Research Institute

Director, Knight Community Engaged Research Program

Co-Director, OHSU Knight Cancer Institute Community Partnership Program

**Kerri Winters-Stone, Ph.D., F.A.C.S.M.**

Professor, OHSU School of Nursing

Co-Director, OHSU Knight Cancer Institute Community Partnership Program

Co-Leader, OHSU Knight Cancer Institute Cancer Prevention and Control Program

---

You are receiving this email because you subscribed to receive updates from the OHSU Knight Cancer Institute [Community Partnership Program](#) or have previously submitted an Intent-to-Apply form. [Click here to unsubscribe from future CPP emails.](#)

If this email has been forwarded to you, please [sign up](#) to receive announcements about future funding cycles and training opportunities.

Oregon Health & Science University, 3181 SW Sam Jackson Park Rd. Portland, OR 97239

# 7th Annual Northwest Tribal Opiate Symposium

**PRESENTED BY MUCKLESHOOT BEHAVIORAL HEALTH PROGRAM**

Location: Muckleshoot Casino, 2402 Auburn Way South , Auburn, WA 98002

\*This is a free training and lunch will be provided

**November 9th, 2017, 8:00 am – 4:30pm**

**Keynote Speakers: Steven Freng, Psy.D., MSW, Lonnie A. Nelson, PhD,**

**Susan E. Collins, Ph.D., Brad Finegood, MA, LMHC**



## **Topics Presented:**

- **King County Opiate Task Force Recommendations**
  - **Tribal Medical Directors Program Overview**
    - **Washington State Drug Trends**
      - **Harm Reduction**

**Space is limited!** We can only accept 4 attendees per tribe.

Please submit registration form to Dan Cable at: [dan.cable@muckleshoot-health.com](mailto:dan.cable@muckleshoot-health.com)

# Muckleshoot Behavioral Health

## 7th Annual Northwest Tribal Opiate Symposium

### Registration Form

Muckleshoot Casino - Chinook Room ♦ Auburn, WA

#### Registration Information

Name: \_\_\_\_\_

Occupation: \_\_\_\_\_

Organization: \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ ZIP: \_\_\_\_\_

Phone: \_\_\_\_\_ Fax: \_\_\_\_\_

Contact E-mail: \_\_\_\_\_

#### Accommodation Information

If you need overnight accommodations, we have rooms available at the La Quinta Inn & Suites for a special group rate until October 16th, 2017. La Quinta has 20 rooms blocked out. Please mention "**NW Tribal Opiate Symposium.**" The group rate is \$105.00, plus taxes, includes continental breakfast.

La Quinta Inn & Suites Auburn

225 6th St SE, Auburn, WA 98002

Phone: (253) 804-9999

**\*Please fax your completed registration form to 253-333-3615**

**If you have any questions, please contact Dan Cable at [dan.cable@muckleshoot-health.com](mailto:dan.cable@muckleshoot-health.com)**

**A confirmation e-mail will be sent.**

**From:** LaPlante, Jay <[jay.laplante@fema.dhs.gov](mailto:jay.laplante@fema.dhs.gov)<<mailto:jay.laplante@fema.dhs.gov>>>

**Date:** Monday, Sep 11, 2017, 1:59 PM

**Subject:** COURSE ANNOUNCEMENT - L0552 Continuity of Operations (COOP) for Tribal Governments, October 19-20 in Wellpinit, WA

## **Register Today! CONTINUITY OF OPERATIONS (COOP) FOR TRIBAL GOVERNMENTS TRAINING**

Applications are now being accepted for L-0552 Continuity of Operations (COOP) for Tribal Governments training.

**Date and Location:** October 19-20, 2017 in Wellpinit, WA. Hosted by the Spokane Tribe of Indians.

**Time:** 8:00 a.m. - 4:30 p.m.

**Course Purpose:** To give tribal governments a foundation for ensuring operation of essential government functions during emergency events.



**Course Description:** Hosted by FEMA Region X and the Spokane Tribe of Indians, this course provides tribal representatives and their partners with an understanding of how to develop and implement a Continuity of Operations (COOP) Program to ensure continuity of essential functions across a wide range of emergencies and events. Topics include the legal basis for continuity, continuity planning, determining essential functions, and vital records management for continuity operations.

**Target Audience:** This course is for tribal emergency managers, tribal community response personnel, tribal leaders, emergency support functions, program directors including education, health, natural resources, transportation, public works, facilities management, security, environmental programs, human resources, managers for any tribal enterprises, and tribal partners.

**Funding:** Tuition is free for those accepted. There are no travel/salary stipends available for this offering. All incurred costs are the responsibility of the attendee or sending agency.

**Prerequisites:** Recommended (but not required) prerequisites include E/L0580 Emergency Management Framework for Tribal Governments, IS-0546.a Continuity of Operations Awareness Course, and/or IS-0547.a Introduction to Continuity of Operations.

**Continuing Education Units:** Students completing this course will receive an Emergency Management Institute (EMI) Certificate of Completion for 1.2 CEUs via e-mail after the course is completed.

**Course Coordinator:**

Jay LaPlante  
Tribal Relations Specialist  
FEMA Region X  
Phone: (425) 487-4540  
Fax: (425) 487-4622  
[jay.laplante@fema.dhs.gov](mailto:jay.laplante@fema.dhs.gov)

**Accommodation Requests:** The Federal Emergency Management Agency (FEMA), Region X is committed to providing access, equal opportunity and reasonable accommodation in its services, programs, activities, education and employment for individuals with disabilities. To request disability accommodation, contact Jay LaPlante at least ten working days in advance at the above contact info.

**To Apply:** Please submit your completed 119-25-1 application ([www.training.fema.gov/Apply/119-25-1.pdf?v=20140414](http://www.training.fema.gov/Apply/119-25-1.pdf?v=20140414)) to [jay.laplante@fema.dhs.gov](mailto:jay.laplante@fema.dhs.gov). Applicants will need a FEMA Student Identification (SID) to apply. If you do not yet have a SID, just follow these three simple steps to obtain one.

Step 1: To register, go to: <https://cdp.dhs.gov/femasid/>

Step 2: Click on the "Register for a FEMA SID" button in the middle of the screen

Step 3: Follow the instructions and provide the necessary information to create your account

Once your application is received and you are admitted into the course, you will receive a confirmation email with training location and local lodging options. There is no cost for the training but participants are responsible for their own travel costs.

Please print this announcement for your records and share with whomever may be interested!  
Thank you!

->>----->

Jay LaPlante  
Tribal Relations Specialist  
Office of External Affairs  
FEMA Region X  
Tel: (425) 487-4540  
Cell: (425) 375-5478  
[jay.laplante@fema.dhs.gov](mailto:jay.laplante@fema.dhs.gov)<<mailto:jay.laplante@fema.dhs.gov>>

Federal Emergency Management Agency (FEMA), Region 10 is committed to providing access, equal opportunity and reasonable accommodation in its services, programs, activities, education and employment for individuals with disabilities. To request a disability accommodation contact Jay LaPlante at least five (5) working days in advance at 425-487-4540 or email at [jay.laplante@fema.dhs.gov](mailto:jay.laplante@fema.dhs.gov).



## Quarterly Regional Tribal Update

### Region 10 - Alaska, Idaho, Oregon, and Washington

September 2017

Dear Colleagues-

The spring and summer have flown by—it's been over five months since the HHS Region 10 Tribal Consultation. A lot has happened and continues to happen here in our region in response to tribal needs.

We continue to make progress on the Top 10 Issues identified in the Tribal Consultation, which we have shared on the Quarterly Tribal Calls.

Additionally, HHS Region 10 has stepped up efforts to increase communication with tribes, including providing biweekly updates on grants, resources, and training/webinars, and this quarterly newsletter. We have received positive feedback on both of these new avenues of communication. If there are ways we can make either the updates or this newsletter better, please feel free to reach out to us.

HHS Region 10 staff organized an Opioid Working Group in response to the nationwide opioid epidemic, which has deeply affected our tribal communities. We're meeting with various organizations, including tribal organizations, to see firsthand the challenges and successes happening at a local level. We also hosted an event with state and tribal health board stakeholders earlier this month. You'll see a read-out on our first opioid stakeholder meeting below.

I look forward to making continued progress on addressing tribal needs as we move forward.

Regards,

*Barbara*

*Barbara Greene*  
*Acting Region 10 Director*  
*US Department of Health and Human Services*  
*Serving the states of Alaska, Idaho, Oregon and Washington*  
[Barbara.greene@hhs.gov](mailto:Barbara.greene@hhs.gov)  
[206.615.2010](tel:206.615.2010)

## Tribal Consultation Update | Quarterly Tribal Call Readout

The Summary from the HHS Region 10 Tribal Consultation was circulated to Tribal organizations for review and forwarded to HHS Headquarters in June.

### **August Quarterly Tribal Call**

HHS held a Quarterly Tribal call on August 22, 2017. Regional HHS staff provided updates on the Top Ten Issues identified at our Regional Tribal Consultation. Look for a Save the Date for our next Regional Quarterly Tribal call in November.

# ORD Updates

## Secretary Price Holds White House Tribal Health Meeting

Sec. Price spoke at a White House Tribal Health Meeting on Tuesday September 12, 2017, where he reiterated his commitment to building a culture of greater cooperation and collaboration through IHS and with Indian Country. He identified his three clinical priorities for the department as a whole—the opioid crisis, serious mental illness, and childhood obesity—and reminded participants that the work of tribal communities will be essential to making meaningful progress on them.

The HHS comprehensive five-point strategy for tackling the epidemic encompasses:

- Improving access to prevention, treatment, and recovery services, including the full range of medication-assisted treatments;
- Targeting availability and distribution of overdose-reversing drugs;
- Strengthening our understanding of the crisis through better public health data and reporting;
- Providing support for cutting edge research on pain and addiction; and
- Advancing better practices for pain management.

## Secretary's Tribal Advisory Committee (STAC)

The Secretary attended the Secretary's Tribal Advisory Committee (STAC) September 20-22, 2017 in Oklahoma. This is the first time a meeting of the STAC was held in Indian country. While there, the Secretary continued his on-the-ground experiences with IHS facilities by traveling to Pawnee and Cherokee Nations.

## Dental and Community Health Aides

- **Oregon**

Naomi Petrie, a member of the Confederated Tribes of Coos, Lower Umpqua and Siuslaw Indians, started providing services in July as the first dental health aide therapist (DHAT) to practice in Oregon. She recently graduated from the Alaska Native Tribal Health Consortium DHAT Education Program, where she spent the past 2 years learning the most common preventive and routine restorative care needed at her tribe's clinic in Coos Bay.

- [IHS Explores Behavioral Health Aide Program Success in Anchorage](#)

In May, Minette C. Wilson, Public Health Advisor, IHS, traveled Alaska to visit with the Alaska Native Tribal Health Consortium (ANTHC) to meet with their Behavioral Health Aide (BHA) Program in preparation for the expansion of the Community Health Aide Program (CHAP) in the lower 48. Accompanying her was public health student, Eric Jepeal from Dartmouth College, who developed a comprehensive evaluation proposal for the BHA program. She flew to Dillingham, where she met with practicing behavioral health aides, clinical supervisors, and leadership at the Bristol Bay Area Health Corporation. These aides worked in their field for several years, working their way up through the levels of a BHA. The aides explained how they integrate their traditional practices into service delivery like attending fish camps, berry picking and cultural camps. The aides shared their advice to future BHA's and their hope for the future of BHA's including wanting to see more young men join the field to serve their community. On her return to Anchorage, she visited the CHAP where they provided advice on developing a robust but responsive program in the lower 48. She also met with the Alaska's Department of Behavioral Health where they broke down how legislative changes impact their ability to bill for their services and how partnerships with the state has proven to be vital to expanding their training and certification efforts.

## Opioid Update

On August 10, President Trump stated that the opioid crisis was a national emergency. No formal disaster declaration detailing official measures has been released yet.

### **Opioid Convening Session on Sept 7-8, 2017**

HHS Region 10 staff held an Opioid Convening session on Sept 7-8 in Seattle. Participants included State Health Officers, State Substance Abuse Authorities, State Medicaid Directors, Primary Care Associations and Tribal Health Boards from our 4 states – Alaska, Idaho, Oregon and Washington. Participants were asked to talk prior to the meeting to prepare information on what their states and Tribal health boards were doing related to the opioid crises and to present at the Convening. All were thoroughly engaged and insightful, noting that in some cases they had not had contact with other officials in their own states prior to this. Participants noted the value of meeting with people in their neighboring states who are involved in the issue, and discussed several potential cross-state efforts to collaborate on. Look for more updates as we move forward to address this epidemic.

*(L to R) Esther Lucero, CEO, Seattle Indian Health Board; Verne Boerner, President & CEO, Alaska Native Health Board; HHS Region 10 Acting Regional Director Barbara Greene; and Joe Finkbonner, Executive Director, Northwest Portland Area Indian Health Board at the Opioid Convening Session on September 7.*



### **Alaska VIP Visits**

- RADM Buchanan, then Acting Director of HIS, and other IHS senior leadership visited Alaska. The focus of the trip was on water and sanitation issues in rural Alaska.
- HHS Secretary Tom Price, M.D., visited Alaska in August, where he participated in a roundtable with the Alaska Native Tribal Health Consortium in Anchorage, visited Alaska tribal health facilities, and toured human service sites with programs tailored to the unique needs of Alaska Natives. HHS plays an integral role in the relationship between the federal government and tribal governments – particularly through the department’s Indian Health Service. Members of the Consortium talked about how they are able to leverage federal resources to focus services on individual patients, treating the whole person under difficult circumstances. Secretary Price honored the innovations that tribal health organizations employed to create effective systems of care in a state as vast and diverse as Alaska. Many of the participants highlighted the unique concerns that come with the delivery of care to remote areas as well as the impact of the opioid crisis on tribal communities. Following the roundtable, Secretary Price toured the Alaska Native Medical Center and the Anchorage Native Primary Care Center (ANPCC) to gain a better understanding of how primary care is delivered in Alaska and see the high level of quality care offered at these facilities. At the Medical Center, Dr. Price met an expectant mother with a high risk pregnancy who had traveled from her home to seek care. At ANPCC he met with Southcentral Foundation leadership and discussed the innovative approach the foundation and ANPCC has taken in delivering health and human services to Alaska Natives. Secretary Price also toured the Ernie Turner Treatment Center and the Claire Swan Early Head Start Child Program where he met with Cook Inlet Tribal Council (CITC) executives. Secretary Price listened to how HHS resources help CITC provide effective, community-based services to Alaska Natives of all ages. For example, at the Claire Swan Early Head Start Child Care Center, Secretary Price saw how Head Start resources can be used to provide child care services that are strongly grounded in the cultural, linguistic, and social needs of Alaskan families. At the Ernie Turner Center CITC shared how participants receive mental health and substance-abuse counseling that is immersed in Alaska Native values.



## ACF Updates

### Administration for Native Americans (ANA)

Need help designing your project? Join one of our Training & Technical Assistance (TTA) providers in your region at an ANA Project Planning and Development (PPD) Training. This in-person training takes place over several days and will walk you through a community-based planning process that will help to shape your project design.

PPD trainings are designed to provide prospective ANA applicants with skills to plan successful community development projects. Come to this training with an understanding of your community's long-range goals. Don't worry if you aren't quite there yet, we can also help you identify those goals along the way.

Participants learn how to:

- Work with community and key partners to identify and document specific problems that stand in the way of meeting community goals
- Create a project work plan to address those problems and attain community goals
- Develop measurable outcomes and impacts to the community
- Determine the level of resources and funding needed to implement the project

Training sessions are offered free of charge to tribes and Native American, Native Alaskan, Native Hawaiian and Pacific Islander non-profit organizations. Each participant is responsible for paying their own travel costs to attend.

Unfunded ANA applicants are strongly encouraged to attend project planning and development training.

To view a list of PPD trainings and to register, visit [our events page](#). For more information on ANA's Applicant Training and Technical Assistance, or to locate your region's TA provider, visit [our TTA page](#).

## ACL Updates

### Elders' Corner

Elders are important to tribal communities as the keepers of tradition, culture, and language. For many years, Title VI Programs have provided meals, transportation, visiting, and a host of other supports to assure that Elders remain active in tribal communities. Tribal leadership can assist these programs in a variety of ways and help provide direction to create a cohesive service system which could be the foundation for establishing Home and Community-based Services in tribal communities. The Elders' Corner is provided by the Region 10 Administration for Community Living staff to provide information about elder programs, needs, and issues.

### Medication Management

For many years, tribal health clinics and Title VI Programs have assisted Elders to manage medication. "Medisets" or pill boxes, brochures, training, and other efforts have focused on the importance of using medication wisely. The usual guidance includes taking medications as prescribed, keeping a list of medications with you, being aware of side effects, and reviewing what you take and how you take it with your medical provider regularly. Today, it is equally important to remind Elders about the importance of keeping medications locked up so they do not contribute to community substance abuse problems.

Elders receive numerous and appropriate prescription medications regularly. It is not uncommon to find their medications on the kitchen counter, on a bedside table, or unlocked in a medicine cabinet where they are available to anyone who enters the home. Every day, SAMHSA estimates that 2,500 kids age 12-17 abuse a prescription pain killer for the first time. Teens abuse prescription drugs pilfered from their parents and grandparents because they believe that they provide a safe high.

"Pharming," swapping prescription drugs and OTC medications and taking them all at once to get high, has become a popular and dangerous trend among teens.

While keeping medications out of the reach of young children is conventional wisdom, keeping the medication away from teens and young adults means more than keeping them on a high shelf. Some suggestions to keep drugs away from community members that abuse or could be tempted to abuse, include the following:

- Don't "advertise" the medications you take. Share only with your doctor or your caregiver. Do carry a list of your medications and why you take them in your wallet. Make sure it is updated regularly.

- Lock your drugs up. Get a lock box for your medications and put it in a place which is convenient for you, but not in plain sight. Wear the key on a lanyard around your neck!
- Be aware of the number of pills in your bottles. If you notice pills disappearing faster than they should, hide them and watch carefully for someone snooping around.
- Don't forget medications which you can purchase from any pharmacy without a prescription. Cold medications and cough syrups with dextromethorphan are commonly abused by young people and need to be locked up.
- Get rid of unused medications properly. Don't hoard drugs for use if an illness recurs unless your doctor has prescribed for that reason. Don't take an old drug for a new problem. The symptoms may be similar, but your treatment with an old prescription may make the condition worse. Don't throw medications into the trash or flush down the toilet because this could introduce the medications into the water we all drink. Watch for "take back" programs at pharmacies or set something up at your tribal clinic to keep medications out of the wrong hands. Old medications are dangerous for you and your community.

It is very important for elders to keep the lines of communication open with young family members and their friends. As an Elder, you have a responsibility to establish a positive course of contact for good counsel. "Don't do Drugs" is usually not sufficient to keep kids from using, but having an Elder to talk with about life and its challenges is priceless.

## CDC Updates

### Agency for Toxic Substances and Disease Registry (ATSDR)

#### Potential health effects from exposures to chemicals from formerly used defense sites on St. Lawrence Island, Alaska

The Native Village of Savoonga asked the Agency for Toxic Substances and Disease Registry (ATSDR) to evaluate the possible health effects from two formerly used defense sites (FUDS) on St. Lawrence Island. The report findings focus on the former military surveillance and communication stations at Gambell (active from 1948 to 1960) and Northeast Cape (active 1950s-1970s) located at opposite ends of the island. ATSDR listened to concerns from village residents and the Tribal Council, reviewed information from various sources, directly evaluated how people might be exposed to chemicals, and prepared a report of the findings. Community concerns include potential exposures from eating subsistence foods, touching contaminated soil, cancer, birth defects, and access to health care on the island. Dr. Rhonda Kaetzel and Joseph Sarcone of ATSDR visited the island to talk to residents about ATSDR's findings. We reviewed data for chemicals in soil, surface water, plants, and fish at each site when available. We screened data from the following chemicals: metals, polycyclic aromatic hydrocarbons (PAHs), pesticides, and polychlorinated biphenyls (PCBs); we also reviewed health outcome data from the Alaska Cancer Registry reports. Based on data collected in the early 2000s, ATSDR did not find enough contact with site contaminants to suggest that exposures were contributing to cancer and birth defect rates. However, if the Northeast Cape becomes a year-round community in the future, ATSDR recommends collecting and analyzing additional fish and plant samples. ATSDR also recommends further testing of Troutman Lake near Gambell if this lake becomes a viable recreation area or source of potable water in the future.

ATSDR health consultation reports for Northeast Cape and Gambell are available for public comment until October 30, 2017. The Agency for Toxic Substances and Disease Registry (ATSDR) is a federal public health agency of the U.S. Department of Health and Human Services. ATSDR works with other agencies and tribal, state, and local governments to look at the way health may be affected in communities where chemicals have been released to the environment.

#### Flu season is around the corner!

Protect yourself and your family this season with an annual flu vaccine for everyone in your family who is 6 months of age and older. While the timing of flu season is unpredictable, seasonal flu activity can begin as early as October and last as late as May. CDC recommends that people get vaccinated by the end of October, if possible.

So, get your flu vaccine today! It takes about two weeks after vaccination for antibodies to develop in the body that protect against influenza virus infection.

You have the power to protect your family against flu this season. Get yourself and your family a flu vaccine. Fight flu!

[Learn more](#). And remember, your flu shot is usually covered by Medicare or insurance.

# CMS Updates

- **Medicaid**

CMS has worked collaboratively with Region 10 state to help improve their Medicaid programs for tribal members. Over the past year we have worked closely with states to approve state plan amendments and provide technical support on their tribal health initiatives. Region 10 states are working to expand health and social programs to address the needs of their tribal communities. For example, Idaho consulted with American Indian/Alaska Native (AI/AN) tribal leadership and CMS to implement coordinated care programs for physical and behavioral health. Oregon continues to receive technical assistance and guidance from CMS and works closely with the AI/AN communities to enhance pharmacy, case management, 100% FMAP, and behavioral health services for reimbursement and expanded services. The State of Washington recently requested technical support to address dental, mental health, and community-based services addressing reimbursement and program needs. And, the state of Alaska received CMS approval of a plan to increase travel services for tribal members utilizing 100% FMAP. The CMS Seattle Regional Office is available to meet with tribal health leaders to provide assistance, and will continue to provide technical support and information when needed for state plan amendment and waiver changes. For additional information about CMS programs, please visit [www.cms.gov](http://www.cms.gov). Additional information about Tribal Health Programs is available at [www.cms.gov/Outreach-and-Education/American-Indian-Alaska-Native/AIAN](http://www.cms.gov/Outreach-and-Education/American-Indian-Alaska-Native/AIAN).

- **Connecting Kids to Coverage National Campaign**

The Connecting Kids to Coverage National Campaign, a national outreach and enrollment initiative funded under the Children's Health Insurance Program Reauthorization Act (CHIPRA) and the Affordable Care Act, reaches out to families with children and teens eligible for Medicaid and the Children's Health Insurance Program (CHIP) to raise awareness about health coverage available under these programs; create opportunities for families to get their eligible children and teens signed up for coverage; motivate parents to enroll their children and teens and renew their coverage; and provide [outreach guides and toolkits](#) that can be used to help states, community organizations, schools, health care providers and others organize and conduct successful outreach activities. The Campaign lets families know who is eligible, what benefits children can get and how to apply for coverage. Interested in learning more about the Connecting Kids to Coverage National Campaign? Visit [www.insurekidsnow.gov](http://www.insurekidsnow.gov). Visit the library (<https://www.insurekidsnow.gov/library/index.html>) for available, customizable, free products and <https://www.insurekidsnow.gov/downloads/library/print/materialscustomizationguide-english.pdf> for Customization. The [Connecting Kids to Coverage National Campaign's School-Based Outreach and Enrollment Toolkit](#) has everything your organization needs for Back-to-School planning. This resource covers partnering with schools, tips for connecting with members of the school community like superintendents and school counselors, and strategies for including enrollment into existing school processes. The Toolkit features ready-to-use materials like message guides, templates, resource links, and offers social media graphics for Facebook and Twitter. The Connecting Kids to Coverage National Campaign Notes eNewsletter is distributed throughout the year and provides updates on Campaign activities. [Sign up](#) to receive this eNewsletter in your inbox.

- **Medicare Card**

To see the newly designed Medicare card go to: <http://www.cms.gov/newcard>.

Healthcare providers and people with Medicare will be able to use secure look-up tools that will allow quick access to the new Medicare numbers when needed. There will also be a 21-month transition period where doctors, healthcare providers, and suppliers will be able to use either their current SSN-based Medicare Number or their new, unique Medicare number, to ease the transition.

This initiative takes important steps towards protecting the identities of people with Medicare. CMS is also working with healthcare providers to answer their questions and ensure that they have the information they need to make a successful transition to the new Medicare number. For more information, please visit: [www.cms.gov/newcard](http://www.cms.gov/newcard), CMS Blog (PDF) or click here: <http://blog.cms.gov/2017/09/14/new-medicare-cards-are-coming-soon> CMS Blog in Spanish (PDF) or click here: <http://blog.cms.gov/2017/09/14/las-nuevas-tarjetas-de-medicare-ya-llegaran-pronto>

- Note: Make sure Social Security has the correct address on file. New Medicare cards will be sent to the address listed in Social Security's files.

- **Resources to Help You Connect American Indians and Alaska Natives to Health Coverage**

We can help you inform American Indians and Alaska Natives (AI/ANs) about Medicare, Medicaid, the Children’s Health Insurance Program (CHIP), and the Health Insurance Marketplace. The Centers for Medicare & Medicaid Services (CMS) Division of Tribal Affairs offers a wide variety of free materials on its newly redesigned [AI/AN Outreach and Education Resources web page](#).

Find materials on how to sign up for health coverage, health benefits for specific medical conditions, and how to access care in a variety of settings.

Resources include:

- Print advertisements
- Radio and video public service announcements in English and five Native languages
- Brochures and fact sheets
- Training for enrollment assisters and health care providers

Use these materials in waiting rooms, at outreach events, and during one-on-one application assistance sessions.

Download them from the website or [order them from the CMS warehouse](#).

- **Medicare Open Enrollment**

- Medicare’s open enrollment period is October 15 - December 7.
- Medicare health and drug plans can make changes each year—things like cost, coverage, and what providers and pharmacies are in their networks. October 15 to December 7 is when all people with Medicare can change their Medicare health plans and prescription drug coverage for the following year to better meet their needs.
- People in a Medicare health or prescription drug plan should always review the materials their plans send them, like the “Evidence of Coverage” (EOC) and “Annual Notice of Change” (ANOC). If their plans are changing, they should make sure their plans will still meet their needs for the following year. If they’re satisfied that their current plans will meet their needs for next year and it’s still being offered, they don’t need to do anything.
- Information for next year’s plans will be available beginning in October.
- To compare plans or for plan information: 1-800-MEDICARE or [Medicare.gov](#).
- To find local assistance, visit the SHIBA website, <https://www.insurance.wa.gov/statewide-health-insurance-benefits-advisors-shiba> and put in your state and county, or call 1.800.562.6900.

- **Centers for Medicare & Medicaid Services: Innovation Center New Direction**

The CMS Innovation Center (Innovation Center) issued an informal Request for Information (RFI) seeking feedback on a new direction to promote patient-centered care and test market-driven reforms that empower beneficiaries as consumers, provide price transparency, increase choices and competition to drive quality, reduce costs, and improve outcomes. The Innovation Center welcomes stakeholder input on the ideas on additional ideas and concepts, and on the future direction of the Innovation Center.

While existing partnerships with healthcare providers, clinicians, states, payers and stakeholders have generated important value and lessons, CMS is setting a new direction for the Innovation Center.

To be assured consideration, please click here for more information:

<https://innovation.cms.gov/initiatives/direction/>.

Helpful links:

Request for Information here: <https://innovation.cms.gov/Files/x/newdirection-rfi.pdf>

To be assured consideration, please [submit comments online](#) or by email to

[CMMI\\_NewDirection@cms.hhs.gov](mailto:CMMI_NewDirection@cms.hhs.gov) through 11:59 p.m. EST November 20, 2017.

## HRSA Updates

**HRSA Awards \$200 Million to Fight the Opioid Crisis** - On Sept 14, 2017, the Health Resources and Services Administration (HRSA) awarded more than \$200 million to 1,178 health centers and 13 rural health organizations in every U.S. state, the District of Columbia, Puerto Rico, the Virgin Islands, and the Pacific Basin to increase access to substance abuse and mental health services. Congratulations to the 83 health centers in Region 10 (AK, ID, OR, WA) that received grant funding totaling \$14,080,655. The official press release can be found [here](#).

Reminder: [Health Care Transit Design Challenge](#) – **October 5**. Building on successful projects funded in the 2015 [Ride to Wellness Initiative](#), the Federal Transit Administration (FTA) seeks new applications for the 2017 Health Care Access Design Challenge. Seven communities will win up to \$30,000 and direct FTA-funded technical assistance to plan and design transportation solutions that improve access to health care. Health care providers in rural communities often separated from patients by great distances can lead transportation improvements to increase [access to care](#) and influence [broader health outcomes](#).

## OASH Updates

Join the **National Resource Center for Domestic Violence Unity Call**: "Why I'm an Advocate" that will include community and national speakers for a 45 minute call, October 3, Noon - 12:45 PM PT, to kick off Domestic Violence Awareness Month. The speakers will offer their perspectives on the power of advocacy to create social transformation—reflecting on their collective shared experience to connect and refocus efforts during October and beyond. Dial (888) 609-1607 (Toll-Free), passcode 97818684# to join the call. Each year hundreds of individuals join the call, with many more listening together in community based organizations, counseling centers, domestic violence programs, rape crisis centers, at school or at home.

## SAMHSA Updates

**New Resource: SAMHSA Knowledge Network** - We are pleased to announce SAMHSA's Knowledge Network website, the premier library of online behavioral health training, technical assistance, and workforce development resources for the health care community.

The Knowledge Network provides a single, searchable portal to SAMHSA's publicly available online training and technical assistance content with the goal of improving the design and delivery of prevention, treatment, and recovery services. This website will help health care practitioners to find specific tools and resources more easily (such as webinars, white papers, fact sheets, trainings, and videos) that span SAMHSA's broad portfolio across many disciplines and online locations.

Visit the [SAMHSA Knowledge Network](#).

The webinar presentation entitled, "**Strategies Addressing the Opioid Crisis in Tribal Communities**" is now available on SAMHSA's YouTube Channel. To view the presentation, visit <https://youtu.be/GG8NudoAr4>.

## Tribal Best Practices

Share your best practices and other tribes might be able to adapt them to their situations. We welcome best practices related to the entire continuum of care. Send your best practices to Nicki Massie at [Nicholson.Massie@hhs.gov](mailto:Nicholson.Massie@hhs.gov). Please be sure to share a point of contact including his or her contact information so tribes can reach out for more information.

### **Coeur d'Alene Tribe's POWWOW Sweat**

The Coeur d'Alene Tribe of Indians has been recognized across the nation for finding creative ways to combat and reduce chronic disease. Perhaps most notably, they created a new cardio exercise routine called [POWWOW Sweat](#).

POWWOW Sweat is a series of workout videos that breaks down six traditional dances into step-by-step exercise routines. The videos include warmup calisthenics to rhythmic dance forms such as the grass dance, fancy dance and crow hop. Tribal members say it taps into their heritage in a way that other popular mainstream exercise videos cannot. The exciting part is that POWWOW Sweat can be done in a large group setting or in a private setting, like a living room, by simply playing the DVD or by accessing the videos online.



*Coeur d'Alene Tribe members bring "Powwow Sweat" to Washington D.C. on Tuesday, Sept. 27, 2016.*

Although it appeals strongly to American Indian populations, the exercises and dances can be done by non-American Indians as well. In fact, the former Surgeon General and Interior Secretary participated in a live version of POWWOW Sweat during the second annual White House Tribal Youth Gathering in Washington D.C. last September.

In addition, the Coeur d'Alene Tribe has worked diligently to re-establish and promote the [qhest life](#) - meaning living a good, healthy and traditional way of life. For the past three years, the *qhest* way of life has been promoted through the *hnqhesnet* (REACH) project with the assistance of a \$2,483,943 grant from the Centers for Disease Control and Prevention's [Racial and Ethnic Approaches to Community Health](#) (REACH). The total length of the grant will span over a total of four years.

To date, funding from REACH has assisted in the building and rebirth of the Coeur d'Alene Tribe canoe fleet, established community and personal gardens, strengthened the local farmers market, and provided healthy food sections at the local food market. REACH funding has also been used in ways that promote and heighten interest and knowledge amongst adults and children in the traditional ways of the Coeur d'Alene Tribe. This includes learning about traditional foods, traditional physical activity, food security, and increasing accessibility to healthy foods.

As a result of the efforts of the Coeur d'Alene Tribe, POWWOW Sweat received the IHS Portland Area Director's Recognition 2016 Award of Excellence in Leadership and the *hnqhesnet* REACH program received the IHS Portland Area Director's Recognition of Excellence for Health Award of Promotion Disease and Prevention.

For further information about POWWOW Sweat, contact LoVina Louie @ [llouie@bmc.portland.ihs.gov](mailto:llouie@bmc.portland.ihs.gov).

*Article written by Lee Zahir, POWWOW Sweat, Photo courtesy of POWWOW Sweat.*

## Good News from Tribes

### A Premiere Partnership Ties Tribal Education Together

When the dental assistant training program began in 1991, no one could imagine what the future would hold. A two-week course for students around Alaska was held in a portable learning space outside the old Alaska Native Medical Center hospital, with a focus on discussion rather than clinical experience, with no textbooks and no technology. Despite the challenges it faced, the program persevered and "graduated" professionals who are still in the dental profession-one who is a current administrator at Southcentral Foundation. In 1997, with the new Alaska Native Medical Center dental clinic, the program grew and 12 to 16 dental assistants completed the course throughout the year.



*Southcentral Foundation leadership and the SCF Dental Assistant Technology program staff together with Salish Kootenai College DAT program leadership, as they celebrate the start of a new partnership for dental assistant training. Laura Stoddard (SCF), Carol East (SCF), Dr. Kevin Gottlieb (SCF), Danica Luedtke (SKC), Dr. Katherine Gottlieb (SCF President/CEO), Jennifer Hoff (SKC), Royann Royers (SCF), Stephen Spencer (SCF), Donna Kotyk (SKC), Dr. Tom Kovaleski (SCF)*

The Southcentral Foundation dental assistant program has evolved over the years with defined curriculum, increased clinic time for training, new technologies to aid in learning and additional instructors, which allowed the program to train 24 dental assistants a year. While

this growth was commendable, the program recognized it could still move forward.

Royann Royer, with the program since its inception, took charge of leading the change and began working to gain Commission on Dental Accreditation. CODA accredits dental schools and dental education programs across the nation. It provides a national bar for education standards in the dental profession. The challenge for SCF was that it was not a recognized school. So Royann searched for a partner.

Salish Kootenai College (SKC) is a small, American Indian college nestled in the Flathead Indian Reservation in Montana. Although SKC and SCF are separated by thousands of miles, they are close in ideology. With SKC's mission to provide postsecondary educational opportunities for Native American peoples while promoting community and cultural identity and SCF's mission to increase Alaska Native people in clinical positions, this partnership was a perfect fit. Working to create a relationship with their leadership team, Royann was able to secure an agreement that would allow SCF to be an out-of-state campus site for the college program.

SCF is the first out-of-state campus site, for dental assisting training, in the country. It allows students to gain 52 college credits, at no cost to the students, and be trained in the SCF Dental Clinics. Upon graduating, students earn a Certificate in Dental Assistant Technology from SKC. Graduates are eligible to take a national accreditation test to become a Certified Dental Assistant and, if eligible, begin their careers at SCF Dental.

In the 26 years of the DAT program, approximately 400 students have completed the training. The SKC dental assistant program also began in 1991, and has more than 750 graduates. The first SKC-SCF class is currently underway.

*For more information, or to apply for the program, visit [www.southcentralfoundation.com/dat-program](http://www.southcentralfoundation.com/dat-program).*

Article and photos courtesy of SCF Public Relations.

*Southcentral Foundation President/CEO Dr. Katherine Gottlieb with Salish Kootenai College Dental Assistant Technology program leadership Donna Kotyk, Danica Luedtke, and Jennifer Hoff at the partnership celebration.*



## Useful Information

### Training & Webinars

- **Nuka Health Care Innovation Conference**

Developed by Alaska's Southcentral Foundation, the Nuka System of Care ("Nuka") is recognized as one of the world's leading models of health care redesign. It is also the name given to Southcentral Foundation's whole health care system, which provides medical, dental, behavioral, traditional and health care support services to more than 65,000 Alaska Native people. Join other primary care and community health leaders, direct-care providers, consultants, and academics for the first-ever Nuka Health Care Innovation Conference. Read more and register [here](#).

When: October 23-24, 2017 Where: Portland, OR

- **Native Languages Summit: Preserving the Hearts of Our Cultures**

- Dates: Monday, October 23 - Tuesday, October 24, 2017

- Location: Indian Pueblo Cultural Center, Albuquerque, NM
- Agenda & registration: <http://www.regonline.com/nativelanguagesummit>
- More information: <https://www.acf.hhs.gov/ana/events/native-language-summit-2017>

This language summit supports Native American communities seeking to retain and revitalize indigenous languages. Through a mix of plenary talks and workshops, we will discuss everything from data and evaluation, to creating fluent teachers, to family and community engagement and more. Language programs with similar approaches (e.g., language immersion, master-apprentice, or online learning) can work together to share solutions and strategies. This conference will be interactive as well as educational.

We will also celebrate 10 years of implementing the Esther Martinez Native American Languages Preservation Act, signed in December of 2006. Through a decade of investment, ANA has supported schools and community-based programs doing everything from curriculum development to teacher training. The Esther Martinez Immersion (EMI) grants support not only children, but their parents and families so that learning extends beyond the classroom and into the home and community. The vision for EMI funding came from our native communities, and we will use this summit to hear from you about your vision for the future.

- **FDA Rural Health Symposium**

**The Rural Health Symposium will provide** a forum for the FDA and key stakeholders in rural and tribal communities to discuss ways they can work together to address the critical and unique health challenges these communities face relative to the opioids crisis; tobacco use among youth; and telemedicine. They want to have an interactive discussion about how these agency priorities are impacting rural and tribal communities across the nation. The information exchange will help to inform future FDA programming and develop sustainable solutions to these priority issues.

Topics:

- Rural Tobacco Use: Research and Interventions
- The Opioid Crisis in Rural America and Tribal Communities
- Advancing Telemedicine: A Federal Perspective

When: October 26 2017 @ 9:00 am - 3:00 pm ET

Where: FDA White Oaks Campus, Great Room A 10903 New Hampshire Ave, Silver Spring, MD 20903

Registration Information: Not yet available

- **Two is Too Late: Increasing Access to Care for Young Native American Children**

This session will provide an overview of the Baby Teeth Matter Collaborative, a joint program of the Northwest Tribal Dental Support Center and ARCORA. This collaborative has successfully increased access and decreased referrals to private pediatric dentists for 0-5 year old American Indian children in the Pacific Northwest using a variety of prevention and early intervention strategies, including minimally-invasive dentistry. The session will highlight one of the communities that employed the first Dental Health Aide Therapist in the Pacific Northwest.

- List three strategies to increase dental access for 0-2 year olds that require collaboration with medical and community programs.
- Describe at least two elements of minimally-invasive dentistry.

When: November 7, 2017, Noon – 1:00pm PT (1p MT, 11a AKT)

Register: [Here](#)

- **7th Annual Northwest Tribal Opiate Symposium**

PRESENTED BY MUCKLESHOOT BEHAVIORAL HEALTH PROGAM (Please see attachments)

Location: Muckleshoot Casino, 2402 Auburn Way South, Auburn, WA 98002

\*This is a free training and lunch will be provided

November 9th, 2017, 8:00 am – 4:30pm



Keynote Speakers: Steven Freng, Psy.D., MSW; Lonnie A. Nelson, PhD; Susan E. Collins, Ph.D.; Brad Finegood, MA, LMHC

Topics:

- King County Opiate Task Force Recommendations
- Tribal Medical Directors Program Overview
- Washington State Drug Trends
- Harm Reduction

**Space is limited!** We can only accept 4 attendees per tribe.

Please submit registration form to Dan Cable at: [dan.cable@muckleshoot-health.com](mailto:dan.cable@muckleshoot-health.com)

## Resources

- Northwest Portland Area Indian Health Board/Healthy Native Youth, in collaboration with the Suicide Prevention Resource Center: New online curriculum. Responding to Concerning Posts on Social Media. This training will prepare adults who work with AI/AN youth to identify youth who post or view concerning posts on social media, and connect them to appropriate services. [Learn more.](#)
- HHS/CDC, National Center for Injury Prevention and Control: New resource. Preventing Suicide: A Technical Package of Policy, Programs, and Practices. This technical package aims to help communities and states develop and implement suicide prevention programs, policies, and practices based on the best available evidence. [Learn more](#) | [Download full package](#) (PDF).
- The American Public Health Association and the Great Lakes Inter-Tribal Council: New video. *Tobacco: Honoring our Traditions and our Health*. This [short video](#), produced by the Tribal Public and Environmental Health Think Tank, depicts tobacco prevention efforts in Wisconsin Tribal communities, highlighting the importance of reclaiming traditional tobacco.
- **Winds of Change Magazine**  
*Winds of Change* is the premier nationally distributed magazine published with a single-minded focus on career and educational advancement for American Indians/Alaska Natives/Native Hawai'ians/First Nations, with an emphasis on STEM. Published five times a year by AISES, four print issues and one digital-only issue, *Winds of Change* print issues are now also available as [digital editions](#). The digital editions offer readers the option of accessing each issue of the magazine online at any time throughout the year. Each year, *Winds of Change* releases an annual [Special College Issue](#) that features the Top 200 Colleges for Native Americans. The Special College Issue has come to be viewed as a crucial resource for students, counselors, and college recruiters alike. In 2016, *Winds of Change* introduced a new monthly newsletter, *Pathways*. [Winds of Change Pathways](#) provides timely information for continued growth and success in STEM education and careers for Native Americans. Every issue includes in-depth coverage of a career development topic for members, from pre-college to mature professional. *Pathways* also provides current information from the AISES family on timely topics and upcoming events.

## Grants

- [Enhanced Training and Services to End Abuse in Later Life Program](#) – Closes 11/8/17, Optional LOI due 10/25/17. Grants for training and services to address elder abuse, neglect, and exploitation, including domestic violence, dating violence, sexual assault, or stalking, involving victims who are 50 years of age or older.
- [Food Insecurity Nutrition Incentive Competitive Grant Program](#) – Closes 12/13/17. The Food Insecurity Nutrition Incentive (FINI) Grant Program for fiscal year (FY) 2018 to support projects to increase the purchase of fruits and vegetables among low-income consumers participating in the Supplemental Nutrition Assistance Program (SNAP) by providing incentives at the point of purchase.

- [Injury Control Research Centers](#) – Closes 6/18/18. The National Center for Injury Prevention and Control (NCIPC) is seeking applications from qualified organizations for Injury Control Research Center (ICRC) grants. These centers will conduct high quality research and help translate scientific discoveries into practice for the prevention and control of fatal and nonfatal injuries and violence that support NCIPC's priorities and mission. ICRCs are expected to blend Outreach, Training and Education, and Research activities into a program to reduce the number, risk, and public health impact of injury and violence in the U.S.
- [Intervention Research to Improve Native American Health \(R01 Clinical Trial Optional\)](#) – Closes 5/14/20. The purpose of this funding opportunity announcement (FOA) is to encourage exploratory developmental research to improve Native American (NA) health. Such research can include: conducting secondary analysis of existing data (such as databases that the Tribal Epidemiology Centers have collected); merge various sources of data to answer critical research questions; conduct pilot and feasibility studies; and/or assess and validate measures that are being developed and/or adapted for use in NA communities. For the purposes of this FOA, the term 'Native Americans' includes the following populations: Alaska Native, American Indian, and Native Hawaiian. Studies should: be culturally appropriate and result in promoting the adoption of healthy lifestyles; improve behaviors and social conditions and/or improve environmental conditions related to chronic disease; prevent or reduce the consumption of tobacco, alcohol, and other drugs; improve mental health outcomes; reduce risk of HIV infection; improve treatment adherence and/or health-care systems adopting standards of care to improve overall quality of life.
- [Research to Improve Native American Health \(R21 Clinical Trial Optional\)](#) – Closes 6/19/20. The purpose of this funding opportunity announcement (FOA) is to encourage exploratory developmental research to improve Native American (NA) health. Such research can include: conducting secondary analysis of existing data (such as databases that the Tribal Epidemiology Centers have collected); merge various sources of data to answer critical research questions; conduct pilot and feasibility studies; and/or assess and validate measures that are being developed and/or adapted for use in NA communities. For the purposes of this FOA, the term 'Native Americans' includes the following populations: Alaska Native, American Indian, and Native Hawaiian. Studies should: be culturally appropriate and result in promoting the adoption of healthy lifestyles; improve behaviors and social conditions and/or improve environmental conditions related to chronic disease; prevent or reduce the consumption of tobacco, alcohol, and other drugs; improve mental health outcomes; reduce risk of HIV infection; improve treatment adherence and/or health-care systems adopting standards of care to improve overall quality of life.
- Robert Wood Johnson Foundation (RWJF): 2018 Culture of Health Prize. This prize recognizes communities that have placed a priority on social determinants of health such as where people live, learn, work, and play; the safety of those surroundings; and the relationships within families and communities. Deadline is November 3, 2017. [Learn more](#)
- AIDS United Syringe Access Fund will award approximately \$2 million in new grants, covering a two-year period by the start of 2018. Closes 11/10/17 at 5p ET.  
The primary goal of the Syringe Access Fund is to provide core support for programs that demonstrate:
  - An ability to provide high quality syringe access services to one or more identified population(s); and
  - An ability to conduct local, statewide, or national-level policy advocacy initiatives that demonstrate concrete objectives and activities to expand access to sterile syringes.[Learn more.](#)
- [Annie's Grants for Gardens](#) - Offers grants to develop edible garden projects that help connect kids to nutritious food. Application Deadline: Nov 11, 2017, Sponsor: Annie's Homegrown, Inc.
- [Whole Kids School Garden Grant Program](#) - Grants to support new or existing edible gardens at K-12 schools and nonprofit organizations. Application Deadline: Nov 15, 2017, Sponsor: Whole Kids Foundation

## **Scholarships for Native Americans**

- **ACS Scholars Program**

**Amount** Up to \$5,000

**Deadline** March 1, 2018

**Requirements**

- Be American Indian, African-American, or Hispanic/Latino
- Be a U.S. citizen or permanent resident
- Be full-time student at high school or accredited institution
- Intending to or already majoring in chemistry, biochemistry, chemical engineering, or other chemically-related science
- Demonstrate 3.0 GPA or better in chemistry or science
- Demonstrate financial need

**Additional Info**

Students intending to enter pre-med programs or those pursuing a pharmacy degree are not eligible for this scholarship. [View Scholarship](#)

- **American Indian College Fund Scholarship Programs**

**Amount** Varies

**Deadline** May 31, 2018

**Requirements**

- U.S. citizen or Canadian citizen eligible to attend college in U.S.
- Enrolled full-time in certificate, undergraduate, or graduate program at an accredited nonprofit institution
- Registered member of federal- or state-recognized tribe/descendant of at least one grandparent or parent who is an enrolled member
- Minimum 2.0 GPA

**Additional Info**

GPA requirements may vary depending on the scholarship. [View Scholarship](#)

- **AIGC Native American Scholarships**

**Amount** Varies

**Deadline** 2018 deadline TBA

**Requirements**

- Proof of tribal membership or eligibility
- Full-time enrollment status at a college or university

**Additional Info**

Requirements of specific awards may vary slightly. Details are specified on the organization website. [View Scholarship](#)

- **American Indian Education Fund Scholarships**

**Amount** \$1,000-\$2,000

**Deadline** 2018 deadline TBA

**Requirements**

- Documentation of tribal enrollment for student or student's parent
- Minimum 2.0 GPA for undergraduate students and 2.5 GPA for graduate students
- Enrolled full-time in accredited institution

**Additional Info**

Requirements of awards for undergraduate and graduate students vary. Details are specified on the organization website. [View Scholarship](#)

- **CSDIW Native American Scholarship**

**Amount** \$5,000

**Deadline** June 15, 2017

**Requirements**

- An enrolled tribal member with plans to work with Native Americans in the fields of education or social service
- Accepted or planning to attend accredited institution as an undergraduate student
- Minimum 3.0 GPA

**Additional Info**

Students entering their junior year of undergraduate studies preferred. [View Scholarship](#)

- **Cobell Scholarships**

**Amount** Varies

**Deadline** June 15, 2017

**Requirements**

- An enrolled tribal member of federally-recognized tribe
- Enrolled as full-time student
- Attending or planning to attend nationally, regionally, and industry accredited nonprofit institution
- Pursuing certificate/diploma, associate, bachelor's master's, doctoral, or professional degree

**Additional Info**

2018/2019 scholarship applications will be available December 2017. [View Scholarship](#)

- **NTUA Scholarship**

**Amount** \$2,000

**Deadline** 2018 deadline TBA

**Requirements**

- Enrolled full-time in field of study related to multi-service utility industry
- Minimum GPA of 2.0 for undergraduate work or 3.0 for graduate work

**Additional Info**

Details of eligibility criteria outlined on scholarship website. [View Scholarship](#)

- **NBCC Foundation Rural Scholarships**

**Amount** \$8,000

**Deadline** Oct 31, 2017

**Requirements**

- Be enrolled in good standing in a CACREP-accredited master's degree counseling program
- Reside in a rural area as defined by the Health Resources and Services Administration (HRSA)
- Display a commitment to provide counseling services in a rural area for at least 2 years after graduation
- Commit to apply for the National Certified Counselor (NCC) credential prior to graduation

**Additional Info**

[View Scholarship](#)

- **Udall Scholarship**

**Amount** Up to \$7,000 each

**Deadline** March 18, 2018

**Requirements**

Students must be Native Americans or Alaska Natives that are undergraduate sophomores and juniors and are working towards positive solutions to environmental challenges or to issues impacting Indian country.

### **Additional Information**

The Udall Scholarship offers scholarships to Native Americans and Alaska Native students pursuing careers related to tribal public policy, self-governance, native health, or the environment. [View Scholarship](#)

## **Final Thoughts**

We would love to follow your tribe or tribal organization on Twitter if you have an account. Please contact Nicki Massie at [Nicholson.Massie@hhs.gov](mailto:Nicholson.Massie@hhs.gov) with your Twitter page information. You may also contact Nicki with suggestions, best practices, good news stories, or to be added to or removed from our tribal email list.

[Follow HHS Region 10 on Twitter](#) @HHSRegion10

You are invited to attend  
**VA Portland  
Health Care  
System's  
Job Fair!**

**Interviews will be conducted onsite for**

**Medical Support Assistants (MSAs)**

Administrative support staff for  
inpatient/outpatient/call center

**Licensed Practical Nurses (LPNs)**

Operative Care/Specialty Clinics/  
Primary Care Clinics/Mental Health Clinics

**Housekeepers (HKAs)**

Must be a preference eligible Veteran

**VA**



U.S. Department  
of Veterans Affairs



**When**

Saturday, October  
21<sup>st</sup>, 2017

9am to 1pm

Last Applicants will be re-  
ceived at 1 pm, no later

**Where**

VA Portland Health  
Care System

Check in at the main lobby  
3710 SW U.S. Veterans  
Hospital Rd.  
Portland, OR 97239

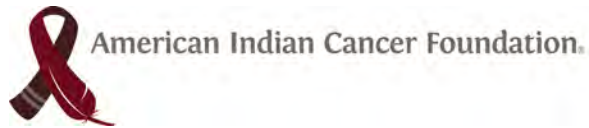
**Bring your  
resume!**

Additional documentation

- 2 forms of govern-  
ment issued ID
- Veterans: DD-214
- Current Federal



[https://www.usajobs.gov/  
GetJob/ViewDetails/480153900](https://www.usajobs.gov/GetJob/ViewDetails/480153900)



**TITLE:** Research Manager

**REPORTS TO:** Chief Executive Officer

**FULL-TIME FLSA STATUS:** Exempt

**SALARY:** DOQ

The American Indian Cancer Foundation (AICAF) is committed to reducing cancer burdens for American Indian and Alaska Native people through improved access to prevention, early detection, treatment and survivor support. The RESEARCH MANAGER is responsible for leading our national native cancer equity research agenda, along with all aspects of multiple community based cancer prevention research projects and direct supervision of research staff in achieving program goals with adherence to work plans. The ideal candidate will have extensive community-based public health research experience and a successful record of obtaining research funding and published research findings. This is a great opportunity for someone to lead community-driven research in partnership with trusted community and academic partners

#### **RESPONSIBILITIES INCLUDE:**

- Develop new research projects in alignment with AICAF mission and research priorities.
- Identify opportunities and lead grant writing to secure funding for new research projects.
- Manage and track all aspects of multiple research projects (planning, implementation, dissemination)
- Manage project budgets, work plans and timelines.
- Supervise employees to manage and track research project requirements.
- Communicate progress and potential issues with partners, consultants and funders.
- Manage program communications with external audiences (scientific and community papers, reports, webinars and presentations at conferences and with community and academic partners).
- Take a lead role within the AICAF team by working directly with CEO and Management Team to support the development and implementation of organizational strategies, policies and practices.
- Complete other duties as assigned.

#### **Preferred Background and Skills**

- Master's Degree in Public Health or related field (PhD preferred).
- Minimum of 5+years community-based public health cancer research experience.
- History of successful research funding and published research.
- Understanding of IRB processes (University and Tribal).
- Demonstrated experience planning, tracking, and documenting research projects.
- Self-motivated with ability to prioritize and carry out concurrent projects on deadline.
- Persistent attention to detail, while maintaining an overall view.
- Must have demonstrated work ethic, integrity and professional conduct.
- Must have demonstrated abilities in report writing and public speaking.
- Available to work beyond the usual office hours as needed to get the work done.
- Must have a current driver's license, vehicle and proof of insurance.
- Abstinence from commercial tobacco and illegal drugs.
- Strong passion for the mission and vision of the organization.

#### **Essential functions**

- Ability to remain in stationary position for long periods of time.
- Ability to travel by vehicle and/or air as needed.

**Compensation Package:** Salary and benefits, including paid vacation, holidays, sick leave, insurances (health, dental, short and long-term disability, life) and retirement plan with an employer match.

To apply: Submit a cover letter and CV/resume to [info@AmericanIndianCancer.org](mailto:info@AmericanIndianCancer.org) by 10.23.17. Find out more at [www.AICAF.org](http://www.AICAF.org) EOE/AA

**INDIAN HEALTH SERVICE  
JOINT DIRECT SERVICE TRIBES ADVISORY COMMITTEE &  
TRIBAL SELF-GOVERNANCE ADVISORY COMMITTEE MEETING**

Location: TBD  
Washington, DC

**Date: Monday, October 23, 2017**

---

- 9:00 AM **TRIBAL OPENING**
- 9:05 - 9:15 AM **TRIBAL OPENING REMARKS**  
**DSTAC & TSGAC Chairs**  
The Chairs of each Committee will review the shared purpose and format for the joint meeting with a brief presentation followed by committee discussion that focuses on identifying shared objectives, goals, and recommendations for next steps.
- 9:15 - 9:20 AM **OPENING REMARKS BY INDIAN HEALTH SERVICE**  
**Acting Director, Indian Health Service (or DDIGA)**
- 9:20 - 9:30 AM **INTRODUCTIONS**  
**Morning Moderator: TBD (DSTAC/TSGAC Chair/Vice Chair)**
- 9:30 - 10:30 AM **INDIAN HEALTH SERVICE BUDGET**  
**Purpose:** The IHS Office of Finance and Accounting (OFA) will provide a brief overview of the IHS Budget, and describe the current budget environment. The committees will discuss identifying shared budget priorities.  
  
**Ann Church, Acting Director, OFA, IHS**
- 10:30 – 10:45 AM **BREAK**
- 10:45 – 12:00 PM **IHS STRUCTURE, QUALITY FRAMEWORK, RECRUITMENT & RETENTION PRIORITIES**  
**Purpose:** The IHS will provide an update on the latest Agency efforts regarding the HHS Reimagine initiative, the IHS Quality Framework initiative, and the current status of IHS vacancies, along with IHS efforts to improve its overall recruitment and retention efforts. This session will also provide an opportunity for IHS and Tribal representatives to engage in a discussion about these priorities which affect health service programs.
- 12:00 – 1:30 PM **LUNCH**  
**Afternoon Moderator: TBD (DSTAC/TSGAC Chair/Vice Chair)**
- 1:30 – 2:45 PM **INFORMATION TECHNOLOGY - RESOURCE AND PATIENT MANAGEMENT SYSTEM**  
**Purpose:** The IHS OIT will provide an update on the OIT and RPMS. The discussion will focus on information technology system priorities that affect public health programs as well as how Direct Service and Self-Governance Tribes may improve efforts to address IT issues, including RPMS and other IT related topics.  
  
**CAPT Mark Rives, Director, OIT, IHS**
- 2:45 – 3:00 PM **BREAK**



3:00 – 3:45 PM

**VETERANS ADMINISTRATION (VA) AND IHS MEMORANDUM OF UNDERSTANDING**

**Purpose:** The discussion will focus on the current VA and IHS MOUs and the status of the reimbursement agreements between IHS and Tribes with VA.

**TBD/DDIGA**

3:45 – 4:30 PM

**BEHAVIORAL HEALTH BUDGET PRIORITIES**

**Purpose:** Tribal representatives and IHS Leadership will discuss the Opioid Epidemic and other behavioral health initiatives and tribal budgeting and funding priorities that affect Behavioral Health Programs.

4:30 – 4:45 PM

**WRAP-UP**

**Purpose:** The purpose of this discussion is to provide an opportunity for Tribal representatives and IHS leadership to engage in a discussion about the next steps or recommendations in moving forward.

**Federal Leadership**

**TBD/DDIGA**

**TBD, Director, ODSCT**

**TBD, Director OTSG**

4:45– 5:00 PM

**TRIBAL CLOSING**

**N C C D P H P**  
**GOOD HEALTH AND WELLNESS IN INDIAN COUNTRY**  
**TRIBAL RESOURCE DIGEST**

Welcome to Centers for Disease Control and Prevention’s (CDC) tribal resource digest for the week of September 11, 2017. The purpose of this digest is to help you connect with the tools and resources you may need to do valuable work in your communities.



*White Buffalo—Bear Country, AZ  
 Photo courtesy of Christina Iyengar*

**Table of Contents**

<b>Request for Photos.....</b>	<b>2</b>	<a href="#"><u>Whole Kids School Garden Grant Program</u></a>	
<b>Articles of Interest.....</b>	<b>2</b>	<b>Webinars.....</b>	<b>2</b>
<a href="#"><u>Addressing American Indian Health Disparities: Q&amp;A with Dr. Don Warne</u></a>		<a href="#"><u>Positive Youth Development for American Indian and Alaska Native Youth</u></a>	
<a href="#"><u>Rural Health Leadership Radio™: A Conversation with Christian Curtis</u></a>		<a href="#"><u>Great Plains Tribal Chairmen’s Health Board Community Health Webinar Series</u></a>	
<a href="#"><u>Rural Coverage Trends for AI/AN Children and Families</u></a>		<b><a href="#"><u>CDC Calls for American Indian/Alaska Native Public Health Success Stories</u></a></b>	<b>3</b>
<a href="#"><u>Responding to the Opioid Crisis: An Update for Tribal Leaders</u></a>		<b>Contact Information.....</b>	<b>4</b>
<b>Funding Opportunities.....</b>	<b>2</b>		

## Request for Photos

Please send any photos of GHWIC work (community gardens, events, team meetings, etc.) to Anisha Quiroz, [AQUIROZ@cdc.gov](mailto:AQUIROZ@cdc.gov) with a short description of the photo.

## Articles of Interest

Addressing American Indian Health Disparities: Q&A with Dr. Don Warne *by Beth Blevins*

**D**onald Warne, MD, MPH, is the chair of the Department of Public Health at North Dakota State University and an adjunct clinical professor at the Arizona State University Sandra Day O'Connor College of Law, where he taught American Indian Health Policy. In addition, he serves as the Senior Policy Advisor to the Great Plains Tribal Chairmen's Health Board. Rural Health Information Hub recently discussed health disparities among American Indians and Dr. Warne's transition from medicine to public health policy. Read complete article [here](#).



Rural Health Leadership Radio™: A Conversation with Christian Curtis

**C**hristian Curtis with the Fort Peck Tribes Health Promotion Disease Prevention program (HPDP) is the guest on the radio show this week. Christian is a registered nurse who started working with the Tribes in August 2015. Her plan to continue to work for this program to assist in providing medical services to children on the Fort Peck Indian Reservation. Read more and listen [here](#).



Rural Coverage Trends for American Indian and Alaska Native Children and Families *by Joan Alker, Karina Wagnerman, and Andy Schneider*

**T**his report analyzes data using the racial categories established by the U.S. Census Bureau. The time period examined ranges from 2008 and 2015. Previous research by the Georgetown University Center for Children and Families shows that AI/AN children consistently have the highest rates of uninsurance. This issue brief builds on that research by examining trends in health coverage for AI/AN children and families nationally and in states with substantial AI/AN populations. Read more [here](#).



Responding to the Opioid Crisis:  
An Update for Tribal Leaders

**S**ince 2000, drug overdose death rates increased 137 percent in the U.S., and in 2014, 61 percent involved an opioid (Rudd et al., 2016a). Opioids include prescribed pain medications as well as illegal drugs. The impact of this crisis on American Indians and Alaska Natives is severe. Read more [here](#).

## Funding Opportunities

Whole Kids School Garden Grant Program

**W**hole Kids School Garden Grant Program offers funding for the planning, construction, and/or operation of edible garden projects. See schedule for webinars. Read more [here](#).

Deadline: **November 15, 2017**

## Webinars

Positive Youth Development for American Indian and Alaska Native Youth

**P**roject Venture, an evidence-based intervention, combines traditional native wisdom with positive youth development, social emotional learning, outdoor adventure, and service learning to create a unique approach that has been successful for more than 25 years. Read more [here](#).

When: **September 20, 2017 @ 3:00 pm ET**



**Great Plains Tribal Chairmen's Health Board**  
Community Health Webinar Series

**T**he Community Health Department will be hosting monthly webinars for tribal partners. Contact information below regarding times and dial-in information.

Marie Zephier, MPH  
Program Manager, GPGHW  
**Great Plains Tribal Chairmen's Health Board**  
[Marie.zephier@gptchb.org](mailto:Marie.zephier@gptchb.org)  
1770 Rand Road, Rapid City, SD 57702  
(P) 605.721.7373 ext. 122 (F) 605.721.2876

Date	Topic	Presenter(s)
9/13/17	Using the Indigenized Traditions to Make Health Choices	Thosh and Chelsea
10/11/17	Active Living Everyday	Kendra Roland, Cancer Prevention
11/8/17	LEAN Essentials	Eugene Giago, PC
12/13/17	Making PSE Changes in Tribal Communities	Shannon Udy, PSE Health Educator

## CDC Calls for American Indian/Alaska Native Public Health Success Stories

Tribal nations are active and important contributors to public health, and tribal cultures have long fostered health and wellness among American Indians/Alaska Natives (AI/AN). The Centers for Disease Control and Prevention (CDC) invites you to share stories that show how you do *just that*, so they can be a part of an exciting new exhibit at the [David J. Sencer CDC Museum](#) in Atlanta.

The exhibition—to be held from Sept 22, 2019, through May 1, 2020, in Atlanta—will recognize the public health contributions of the AI/AN community in a visually compelling, culturally appropriate manner. CDC's exhibition will showcase how native traditions and wisdom have affected public health in the past and present, and how AI/AN people have made a difference in the health of their people.

Compared with other Americans, AI/AN people have higher rates of some diseases, disorders, and [deaths](#). This call for stories offers an opportunity for individuals, tribes, tribal organizations, and others to showcase the strengths and resilience of tribal communities, their heritage and traditions, and how their culture addresses risk factors unique to tribes and promotes their health and well-being.

### What Types of Stories Are Needed?

Please send stories that highlight how native traditions and wisdom have affected health, or show contributions of specific AI/AN individuals to health and wellness among AI/AN people. CDC will consider stories that represent the diverse array of tribes, tribal organizations, health issues, and people of Indian Country and AI/AN culture, such as

- Locations—reservation and non-reservation, urban, rural, all geographic areas across the United States
- Health issues—environmental health, chronic diseases, infectious diseases, emergency preparedness and response, injury, behavioral health
- People—individuals, tribes, organizations

### How To Submit A Story?

Story submissions, which should be no more than two pages, single spaced, and size 12 font, can be emailed to [TribalSupport@cdc.gov](mailto:TribalSupport@cdc.gov) by January 15, 2018. Please include website links to photos and pictures of objects that could be included in the exhibit, when available.

All submissions must include the following:

- Brief historical background information that puts the story in context. For example, what is the traditional or cultural practice? How did it contribute to health and wellness in AI/AN people in the past?
- **A description of how this tradition or culture affects people's lives today. The impact could be lives saved, suffering reduced**, fewer visits to health care facilities, adoption of a healthier lifestyle, or other similar benefits. This section should also describe how the practice is promoted among tribes and AI/AN people.
- A list of potential photographs, pictures, documents, media, and objects that can be used to illustrate the story. Is there artwork or children's drawings that represents the practice? Are there radio recordings, letters, posters, or other communications from public health efforts? Are there traditional objects that have evolved to become used in modern day? Are there objects that are still in use today? Please include images and files with the submission, if available.

CDC values the privacy and ownership rights of those in stories. As such, each agency, organization, or individual that contributes a story is responsible for obtaining any necessary permissions or releases from any parties involved in the story.

### How Will Submissions Be Evaluated?

Submissions will be assessed based on the following criteria in the initial review:

- Impact. Is the story educational, inspiring, and persuasive? Does it clearly convey how the culture or tradition being practiced promotes health and wellness?
- Visual components. Are there compelling, high-resolution photographs that illustrate the story? Are there physical objects that are available for use in a museum exhibit? Are there opportunities for interactive displays or actions that could be part of an exhibit?
- Quality, clarity, and historical accuracy. Is the information presented accurately and clearly?

CDC intends to showcase a broad array of public health success stories from across Indian Country, so even if a story isn't a part of the museum exhibit, it could still be showcased on other CDC channels, such as social media, websites, print materials, and presentations. **We can't wait to read your story!**

## Contact Information

National Center for Chronic Disease Prevention  
and Health Promotion

Office of the Medical Director  
4770 Buford Highway, MS F80  
Atlanta, GA 30341  
(770) 488-5131

<http://www.cdc.gov/chronicdisease/index.htm>

The digest serves as your personal guide to repositories of open and free resources where you can find content to enrich your program or your professional growth. Please note that CDC does not endorse any materials or websites not directly linked from the CDC website. Links to non-Federal organizations found in this digest are provided solely as a courtesy. CDC is not responsible for the content of the individual organization web pages found at these links.

If you have comments or suggestions about this weekly update, please email Anisha Quiroz at [AQUIROZ@cdc.gov](mailto:AQUIROZ@cdc.gov) with the words "TRIBAL DIGEST" in the subject line.



C.L. "BUTCH" OTTER – Governor  
RUSSELL S. BARRON – Director

# IDAHO DEPARTMENT OF HEALTH & WELFARE

MATT WIMMER - Administrator  
DIVISION OF MEDICAID  
Post Office Box 83720  
Boise, Idaho 83720-0009  
PHONE: (208) 334-5747  
FAX: (208) 364-1811

September 27, 2017

*Dear Tribal Representative:*

In accordance with section 1902(a)(73)(A) of the Social Security Act regarding the solicitation of advice prior to the submission of any Medicaid State Plan Amendment (SPA) or waiver likely to have a direct effect on Indians, Indian Health Programs, or Urban Indian Organizations, the Idaho Department of Health and Welfare's Division of Medicaid (Idaho Medicaid) provides notice on the following matter.

### **Purpose**

Idaho Medicaid intends to submit a SPA to the Centers for Medicare and Medicaid Services (CMS) on or before December 28, 2017 to renew Idaho's 1915(i) State Plan Option Home and Community-Based Services (HCBS) Benefit for Adults with Developmental Disabilities (Adult DD State Plan HCBS Benefit).

Idaho Medicaid's currently approved Adult DD State Plan HCBS Benefit will expire on June 30, 2018. At this time, the proposed changes to the existing Adult DD State Plan HCBS Benefit are expected to include:

- Addition of habilitation support services;
- Updates to the projected number of participants based on historical trends;
- Addition of statements regarding the reasonable indication of need for services;
- Addition of relevant information from the approved HCBS settings Statewide Transition Plan (STP);
- Addition of statements regarding the limitations on the amount of services available;
- Revisions to the quality improvement strategy;
- Technical changes to accurately reflect current administration and operation; and
- Other minor revisions to correct language and grammar.

### **Anticipated Impact on Indians/Indian Health Program/Urban Indian Organizations**

Indians receiving waiver services may be impacted by these changes. There is no anticipated impact on Indian Health Programs, or Urban Indian Organizations.

### **Availability for Review**

Idaho Medicaid is in the process of drafting the Adult DD State Plan HCBS Benefit renewal, and will notify Tribal Representatives when these drafts become available for review.

September 27, 2017

Page 2

**Comments and Questions**

Idaho Medicaid will make drafts of the proposed Adult DD State Plan HCBS Benefit renewal text available for tribal review and comment. This tribal comment period is expected to begin in late October 2017, and will continue for a period of at least 30 days. Idaho Medicaid will notify Tribal Representatives of the specific dates prior to the start of the formal comment period.

If you have any questions prior to the start of this comment period, you may email Idaho Medicaid at [HCBSWaivers@dhw.idaho.gov](mailto:HCBSWaivers@dhw.idaho.gov) or call Karen Westbrook at (208) 364-1960.

Idaho Medicaid's renewal of the Adult DD State Plan HCBS Benefit will be reviewed as part of the Policy Update at the next quarterly Tribal meeting.

Sincerely,

A handwritten signature in blue ink that reads "Matt Wimmer". The signature is fluid and cursive, with the first name "Matt" and last name "Wimmer" clearly legible.

MATT WIMMER  
Administrator

MW/kw



## GOVERNOR KATE BROWN

### **NEWS RELEASE**

**September 22, 2017**

**Media Contact:**

[Victoria Nguyen](#), 503-689-0248

# **Governor Brown Announces Patrick Allen as Director of the Oregon Health Authority**

(Salem, OR) — Governor Kate Brown today appointed Patrick Allen as permanent director of the Oregon Health Authority (OHA). This appointment is effective September 25, 2017 pending Senate Confirmation, in the manner provided by ORS 171.562 and ORS 171.565.

"Each Oregonian has a right to a healthy, independent life that allows them to succeed," Governor Brown said. "To achieve this goal, the Oregon Health Authority must be capable of maintaining a high value and sustainable health care system. Pat has already proven to be a responsible steward of taxpayer dollars and a valuable leader at OHA. I look



forward to the work he will do to ensure OHA lives up to the expectations of Oregonians."

**READ:** [Governor Brown's letter of expectations to Patrick Allen from his initial appointment to OHA.](#)

###

[www.governor.oregon.gov](http://www.governor.oregon.gov)

[Previous Press Releases](#)

[Chris Pair](#) • Communications Director, Office of  
Governor Kate Brown • (503) 378-5965

---

This email was sent to [robb.cowie@state.or.us](mailto:robb.cowie@state.or.us)

[why did I get this?](#) [unsubscribe from this list](#) [update subscription preferences](#)

Oregon Office of the Governor · 254 State Capitol · 900 Court Street NE · Salem, Oregon 97301 · USA

# Tribal Family Preservation

## Training For Family Support Specialists

**October 23-27, 2017**

**9:00 AM - 5:00 PM each day**

*\*\*Lunch will be provided\*\**

**NPAIHB  
2121 SW Broadway, STE 300  
Portland, OR 97201**



### TOPICS INCLUDE:

*Confidentiality \* Ethics and  
Boundaries \* Identifying Strengths,  
Needs, Culture, and Dreams  
\*Community Resources & Resource  
Mapping \* Grief \* Trauma \*  
Mandatory Reporting \*  
Communication + More*

### Who should attend:

- Family members who are raising a child experiencing behavioral health challenges and want to be certified as a Family Peer Support Specialist
- Tribal members who want to partner with Family Peer Support Specialists to deliver this training in their communities.
- The only peer-to-peer tribal curriculum for Medicaid Billable Family Support Specialists.
- This inaugural training will meet the requirements for family members to be registered as a Family Peer Support Specialist with the State of Oregon AND will include a train the trainer component for those who will be co-delivering the training in their communities.

**Registration for this training is required.**

To register, please use the following link:

**[http://  
conta.cc/2wli2Bb](http://conta.cc/2wli2Bb)**

Please feel free to contact Felicia in the OFSN Training Program if you have any questions regarding registration.

**feliciam@ofns.net | (971) 283.6139**

*This training is a collaboration among Oregon's tribal communities, NARA, NPAIHB, OHA, and OFSN.*

## Traditional Health Worker Full Certification and Renewal Application

### How to submit your application

**Note:** For quickest turnaround, fill out this form on a computer and submit it to [thw.program@state.or.us](mailto:thw.program@state.or.us). Applications sent by **mail** or **fax** may have a **delay of as much as 90 days**.

We will only process fully completed applications.

<b>Email</b> <i>(Best and quickest option)</i>	Attach this complete application and all supporting documents to an email. Send it to: <a href="mailto:thw.program@state.or.us">thw.program@state.or.us</a> .
<b>Mail</b> <i>(Takes up to 90 days)</i>	Mail this completed application and all supporting documents to: Traditional Health Worker Program Oregon Health Authority Office of Equity and Inclusion 421 S.W. Oak St., Suite 750 Portland, OR 97204
<b>Fax</b> <i>(Takes up to 90 days)</i>	Fax this completed application and all supporting documents to: 971-673-1128

### Who can receive a traditional health worker certification?

If you are one of the below workers types and want to receive traditional health worker (THW) certification, you must submit this completed application and all necessary documents to the Oregon Health Authority (OHA).

#### Traditional health workers types include:

- Community health workers (CHW);
- Peer support specialists (PSS);
- Peer wellness specialists (PWS);
- Personal health navigators (NAV); and
- Birth doulas.

#### Complete this application if you meet all of the following requirements:

- You are at least 18 years of age;
- You are not on the Medicaid exclusion list; and
- You have finished all required training for your worker type.
  - Your training must be through an OHA-approved training program.

#### You must also submit the following for a THW certification:

- A clear copy of a driver's license, state-issued ID card or passport for your background check;
- A copy of your training certificate; and
- A completed application.
  - Doulas are also required to submit an "OHA Approved Form for Birth Doula State Registry Certification" (OHA 8908D). To download this form, go to <http://www.oregon.gov/oha/oei/Pages/thw-certification.aspx>

## Criminal background check process

The OHA Office of Equity and Inclusion (OEI) will send your name to the Background Check Unit (BCU). The BCU will email you about completing a required "Background Check Application". They may ask you to submit fingerprints. OEI will notify you by email if fingerprints are required.

For more information about the background check, go to:

<http://www.oregon.gov/oha/oei/Pages/thw-certification.aspx>.

## Completing the process

If OHA confirms you have met all requirements, OHA will notify you in writing of your certification as a THW. OHA will add your name and contact information to the registry of certified THWs.

## Our discrimination policy

The Department of Human Services (DHS) and the Oregon Health Authority (OHA) do not discriminate against anyone. This means that DHS|OHA will help all who qualify and will not treat anyone differently because of age, race, color, national origin, gender, religion, political beliefs, disability or sexual orientation.

You may file a complaint if you believe DHS or OHA treated you differently for any of these reasons.

To file a complaint with the state, you can call the Governor's Advocacy Office at 1-800-442-5238 (TTY 711) or write:

Governor's Advocacy Office  
500 Summer Street NE, E-17  
Salem, OR 97301  
Fax: 503-378-6532  
Email: [DHS.info@state.or.us](mailto:DHS.info@state.or.us)

"Equal opportunity is the law!"

Please type or clearly print.

## Section 1: Applicant information

### 1.1 Application contact information

\_\_\_\_\_  
First name

\_\_\_\_\_  
Middle initial

\_\_\_\_\_  
Last name

\_\_\_\_\_  
Other names used

\_\_\_\_\_  
Date of birth

\_\_\_\_\_  
Email (*personal email recommended*)

\_\_\_\_\_  
Preferred contact number

\_\_\_\_\_  
Mailing address

\_\_\_\_\_  
City

\_\_\_\_\_  
State

\_\_\_\_\_  
ZIP

Make the following information publicly available on the Traditional Health Worker (THW) Registry: Check all that apply OR choose "none" to have name only (*no contact information*) visible.

Email

Phone

Address

None (*name only*)

### 1.2 Application type

Application type:  Full certification  Grandfathering\*  Recertification<sup>†</sup>

\*Grandfather clause: There may be a waiver for this training requirement when you provide proof that you worked or volunteered as a CHW/PWS/NAV in Oregon for at least 3,000 hours and 2,000

hours for PSS within the last five years of the date of this application.

<sup>†</sup>Recertification applicants must attach proof of 20 continuing education units (CEUs) and apply within 60 days of expiration. See Section 3 for instructions.

**THW type (check all that apply):**

- Birth doula<sup>‡</sup>
- Community Health Worker (CHW)
- Peer Support Specialist (PSS):
  - PSS type:  Adult addictions  Adult mental health  Family support  Youth support
- Peer Wellness Specialist (PWS):
  - PWS type:  Adult addictions  Adult mental health  Family support  Youth support
- Personal Health Navigator (PHN)

<sup>‡</sup>**Birth doulas:** You must submit the “OHA Approved Form for Birth Doula State Registry Certification” (OHA 8908D). To download this form, go to <http://www.oregon.gov/oha/oei/Pages/thw-certification.aspx>.

**1.3 Training information**

**1.3a Training type (check the type of training program that you have completed):**

- DONA or to Labor Doula Certification AND six (6) hours of OHA-Approved Cultural Competency Training
- OHA-Approved Birth Doula Training
- OHA-Approved CHW, PWS, PSS, NAV Core Curriculum Training
- OHA-Approved Incumbent Worker Training
- Other Birth Doula training program not yet approved by OHA
- Other THW training program not yet approved by OHA
- Grandfather application
- Required Oral Health Training Program (*new requirement for THWs effective Oct 1, 2017.*)

**1.3b Proof of training completion**

Attach proof of completion of the training program\*<sup>†</sup> checked above.

\***Grandfather clause:** There may be a waiver for this training requirement when you provide proof that you worked or volunteered as a CHW/PWS/NAV in Oregon for at least 3,000 hours and 2,000 hours for PSS within the last five years of the date of this application.

<sup>†</sup>**Recertification applicants** must attach proof of 20 continuing education units (CEUs) and apply within 60 days of expiration. See Section 3 for instructions.

**1.3c OHA-approved training program information**

*Fill out the following information about the OHA-approved training program you completed.*

Name of organization: \_\_\_\_\_

Name of training program: \_\_\_\_\_

City where the training took place: \_\_\_\_\_

Start date: \_\_\_\_\_ End date: \_\_\_\_\_ Total hours/CE hours: \_\_\_\_\_

Name of organization: \_\_\_\_\_

Name of training program: \_\_\_\_\_

City where the training took place:

Start date:

End date:

Total hours/CE hours:

Name of organization: \_\_\_\_\_

Name of training program: \_\_\_\_\_

City where the training took place:

Start date:

End date:

Total hours/CE hours:

#### 1.4 Work experience (*New and grandfathered applications*)

Name of organization: \_\_\_\_\_

Title: \_\_\_\_\_

Start date: \_\_\_\_\_ End date: \_\_\_\_\_

Total hours worked:

Job description:

Contact person name: \_\_\_\_\_

Contact person email: \_\_\_\_\_

Contact person phone: \_\_\_\_\_

Name of organization: \_\_\_\_\_

Title: \_\_\_\_\_

Start date: \_\_\_\_\_ End date: \_\_\_\_\_

Total hours worked:

Job description:

Contact person name: \_\_\_\_\_

Contact person email: \_\_\_\_\_

Contact person phone: \_\_\_\_\_

Name of organization: \_\_\_\_\_

Title: \_\_\_\_\_

Start date: \_\_\_\_\_ End date: \_\_\_\_\_

Total hours worked:

Job description:

Contact person name: \_\_\_\_\_

Contact person email: \_\_\_\_\_

Contact person phone: \_\_\_\_\_

Please list additional work experience on a separate sheet, if needed.

## Section 2: Demographic and availability information

You can choose whether to complete this section; it will have no impact on your certification.

### 2.1 Alternate formats

1. Do you need written materials in an alternate format (*Braille, large print, audio recordings, etc.*)?

- Yes    No    Don't know/Unknown    Decline/Don't want to answer

### 2.2 Race and ethnicity

2. How do you identify your race, ethnicity, tribal affiliation, country of origin or ancestry?

3. Which of the following describes your **racial or ethnic identity**? Please check **all** that apply.

#### American Indian or Alaska Native

- Alaska Native    Canadian Inuit, Metis or First Nation  
 American Indian    Indigenous Mexican, Central American or South American

#### Hispanic or Latino/a

- Hispanic or Latino Central American    Hispanic or Latino South American  
 Hispanic or Latino Central Mexican    Other Hispanic or Latino (*specify*):

#### Asian

- Asian Indian    Korean  
 Chinese    Laotian  
 Filipino/a    South Asian  
 Hmong    Vietnamese  
 Japanese    Other Asian (*specify*):

#### Native Hawaiian or Pacific Islander

- Guamanian or Chamorro    Samoan  
 Micronesian    Tongan  
 Native Hawaiian    Other Pacific Islander (*specify*):

#### Black or African American

- African (*Black*)    Caribbean (*Black*)  
 African American    Other Black (*specify*):

#### Middle Eastern/Northern African

- Middle Eastern    Northern African

#### White

- Eastern European    Western European  
 Slavic    Other White (*specify*):

#### Other categories:

- Don't know/Unknown    Other (*please list*):  
 Decline/Don't want to answer

4. If you selected more than one racial or ethnic identity above, please write the one that best represents your racial or ethnic identity.

Your answer to this question will be publicly searchable in the THW Registry. If you do not want your ethnicity included in the THW Registry, type "N/A."

### 2.3 Gender and sexual orientation

#### 5. Gender:

- Male     Female     Transgender     Other (*specify*): \_\_\_\_\_  
 Decline/Don't want to answer

#### 6. Sexual orientation (*check one*):

- Gay or lesbian                       Straight, not gay or lesbian  
 Bisexual                                 Queer                                 Other (*specify*): \_\_\_\_\_  
 Decline/Don't want to answer

### 2.4 Language

7. In what language do you want us to:

**Speak** with you: \_\_\_\_\_

**Write** to you: \_\_\_\_\_

8. Do you need a **sign language** interpreter for us to communicate with you?

- Yes     No     Don't know/Unknown     Decline/Don't want to answer

9. Do you need an **interpreter** for us to communicate with you?

- Yes     No     Don't know/Unknown     Decline/Don't want to answer

**If yes**, which type do you need us to communicate with you (*ASL, PSE, tactile interpreting, etc.*)?  
\_\_\_\_\_

10. How well do you speak English?

- Very well     Well     Not well     Not at all  
 Don't know/Unknown     Decline/Don't want to answer

### 2.5 Disability (*check all that apply*)

Your answers to the questions below help us find health and service differences among people with disabilities or limitations. Your answers are confidential.

11. Are you **deaf** or do you have **serious difficulty hearing**?

- Yes     No     Don't know     Decline to answer

**If yes**, at what age did the condition begin? \_\_\_\_\_

12. Are you **blind** or do you have **serious difficulty seeing**, even when wearing glasses?

- Yes     No     Don't know     Decline to answer

**If yes**, at what age did the condition begin? \_\_\_\_\_



13. Does a physical, mental or emotional condition limit your activities in any way?

Yes  No  Don't know  Decline to answer

If yes, at what age did the condition begin? \_\_\_\_\_

14. Do you have serious difficulty **walking or climbing stairs**?

Yes  No  Don't know  Decline to answer

If yes, at what age did the condition begin? \_\_\_\_\_

15. Do you have difficulty dressing or bathing?

Yes  No  Don't know  Decline to answer

If yes, at what age did the condition begin? \_\_\_\_\_

16. Because of a physical, mental or emotional condition, do you have serious difficulty **concentrating, remembering, understanding or making decisions**?

Yes  No  Don't know  Decline to answer

If yes, at what age did the condition begin? \_\_\_\_\_

17. Because of a physical, mental, or emotional condition, do you have difficulty **doing errands alone**, such as visiting a doctor's office or shopping?

Yes  No  Don't know  Decline to answer

If yes, at what age did the condition begin? \_\_\_\_\_

18. What is your age today? \_\_\_\_\_

## 2.6 Geographic availability

Where are you willing to work? (*Choose as many locations as desired*)

**All counties**

- |                                    |                                    |                                     |                                  |                                    |                                     |
|------------------------------------|------------------------------------|-------------------------------------|----------------------------------|------------------------------------|-------------------------------------|
| <input type="checkbox"/> Baker     | <input type="checkbox"/> Crook     | <input type="checkbox"/> Harney     | <input type="checkbox"/> Lake    | <input type="checkbox"/> Morrow    | <input type="checkbox"/> Union      |
| <input type="checkbox"/> Benton    | <input type="checkbox"/> Curry     | <input type="checkbox"/> Hood River | <input type="checkbox"/> Lane    | <input type="checkbox"/> Multnomah | <input type="checkbox"/> Wallowa    |
| <input type="checkbox"/> Clackamas | <input type="checkbox"/> Deschutes | <input type="checkbox"/> Jackson    | <input type="checkbox"/> Lincoln | <input type="checkbox"/> Polk      | <input type="checkbox"/> Wasco      |
| <input type="checkbox"/> Clatsop   | <input type="checkbox"/> Douglas   | <input type="checkbox"/> Jefferson  | <input type="checkbox"/> Linn    | <input type="checkbox"/> Sherman   | <input type="checkbox"/> Washington |
| <input type="checkbox"/> Columbia  | <input type="checkbox"/> Gilliam   | <input type="checkbox"/> Josephine  | <input type="checkbox"/> Malheur | <input type="checkbox"/> Tillamook | <input type="checkbox"/> Wheeler    |
| <input type="checkbox"/> Coos      | <input type="checkbox"/> Grant     | <input type="checkbox"/> Klamath    | <input type="checkbox"/> Marion  | <input type="checkbox"/> Umatilla  | <input type="checkbox"/> Yamhill    |

## 2.7 Work schedule availability

Days available (*check all that apply*):

Sunday  Monday  Tuesday  Wednesday  Thursday  Friday  Saturday

Hours available (*check all that apply*):

Full-time  Part-time  Temporary

## Section 3: Continuing education documentation

Please attach proof of attendance for all Continuing Education Units (CEU) (*certificate, letter of participation or transcript*).

Name of organization: \_\_\_\_\_ Training date: \_\_\_\_\_

Name of training program: \_\_\_\_\_  
Number of hours: \_\_\_\_\_ Trainer name: \_\_\_\_\_  
Pre-approved:  Yes  No

If not pre-approved, please tell us how it is supporting your professional growth and development:

Name of organization: \_\_\_\_\_ Training date: \_\_\_\_\_  
Name of training program: \_\_\_\_\_  
Number of hours: \_\_\_\_\_ Trainer name: \_\_\_\_\_  
Pre-approved:  Yes  No

If not pre-approved, please tell us how it is supporting your professional growth and development:

Name of organization: \_\_\_\_\_ Training date: \_\_\_\_\_  
Name of training program: \_\_\_\_\_  
Number of hours: \_\_\_\_\_ Trainer name: \_\_\_\_\_  
Pre-approved:  Yes  No

If not pre-approved, please tell us how it is supporting your professional growth and development:

List additional work experience on a separate sheet, if you need to.

Total CEU hours: 0

#### Section 4: Code of ethics and signature

Please read the following statements carefully. Indicate your understanding and acceptance by signing below.

I agree to abide by the training and certification rules and traditional health worker standards of professional conduct. Refer to Oregon Administrative Rules (OAR) 410-181-0300 through 410-180-0388.

I understand that Oregon Health Authority (OHA) may deny, suspend or revoke certification status if I do not comply with Oregon Revised Statute (ORS) 414.665 or OAR 410-181-0300 through 410-180-0388.

I understand that I must apply to renew my certification status every three years. I must submit the renewal application no less than 30 days before my current certification period ends. I understand I will be removed from the registry if I fail to renew my certification within the renewal period. If I choose not to renew certification, I agree not to represent myself to potential employers or clients as a certified THW.

I certify that all the information contained in this application is true and accurate to the best of my knowledge and understanding. I understand that my application may be denied or my certification may be revoked if I give false, incomplete or misleading information.

---

Applicant signature

Applicant's printed name

Date

You can get this document in other languages, large print, braille or a format you prefer free of charge. Contact the Traditional Health Worker Program at 1-844-882-7889 or email [thw.program@state.or.us](mailto:thw.program@state.or.us). We accept all relay calls or you can dial 711.

## Traditional Health Worker Certification **FAQ**: Frequently asked Questions & Answers.

1. **How can someone become certified as Traditional Health worker Program?**
  - a. Complete an Oregon Health Authority (OHA) - Office of Equity and Inclusion (OEI) approved training for Peer Wellness Specialist (PWS), Peer Support Specialist (PSS), Community Health Worker (CHW), Patient Health Navigators (PHN), and Doulas. Look for your specific Specialty training. the list of approved trainings programs can be found at this link <http://www.oregon.gov/OHA/OEI/Pages/THW-Approved.aspx> .  
*Please Note: There is more than one page so click to the next page*
  
2. **Who is Eligible to become Traditional health worker?**
  - a. Traditional Health Workers (THWs) help individuals in their communities, providing physical and behavioral health services. There are five (5) Traditional health worker types.
    - i. **Community health workers (CHW)**: A Community Health Worker is a frontline public health worker who is a trusted member of and/or has an unusually close understanding of the community served. (APHA CHW Section).
    - ii. **Peer support specialists (PSS)**: A Peer Support Specialist is any [range of] individuals who provide supportive services to a current or former consumer of mental health or addiction treatment. (From ORS 414.025).
    - iii. **Peer wellness specialists (PWS)**: A Peer Wellness Specialist is an individual who has lived experience with a psychiatric condition(s) plus intensive training, who works as part of a person-driven, health home team, integrating behavioral health and primary care to assist and advocate for individuals in achieving well-being.
    - iv. **Personal health navigators (PHN)**: A Personal Health Navigator is an individual who provides information, assistance, tools and support to enable a patient to make the best health care decisions.
    - v. **Birth doulas**: A (Birth) Doula is a birth companion who provides personal, nonmedical support to women and families throughout a woman's pregnancy, childbirth, and post-partum experience. (From original version of the THW rules, 410-180-0300)
  
3. **After I finish my training hour's requirements, what's next for certification process?**
  - a. Complete the Office of Equity and Inclusion (OEI) certification application an individual can finish application online as well as do hard copy applications. Hard Copy applications can be return to OEI.



Traditional Health Worker Program  
OHA Office of Equity and Inclusion  
421 S.W. Oak St., Suite 750  
Portland OR 97204  
Email [thw.program@state.or.us](mailto:thw.program@state.or.us) or fax: 971-673-1128

- b. For more information, Here is the link of to how to become certified including the application <http://www.oregon.gov/oha/oei/Pages/thw-certification.aspx>
- c. Completed applications can also be emailed to [THW.program@state.or.us](mailto:THW.program@state.or.us)

**4. What are the documents required for Certification?**

- a. Traditional Health program Application, fully completed, signed and dated
- b. Copy of a completion certificate from an OHA Approved training Program
- c. Clear copy of a government-issued identification (state IDs, Driver License, and passport)

**5. After I submit my application to OHA (OEI) what happens to my application?**

- a. OHA/OEI staff will start application process. First, they will internally build profile for the applicants, put them in quae. Secondly, OHA-OEI staff will send the applicant's information to the state background check unit. Third, Background check Unit will send an email to the applicants.
- b. The applicant has 21 days to respond or their background check application will close. It's important the applicants responds t the email from BCU, otherwise, their application will be in pending status, and in some cases may need to start over.

**6. Is the background check free?**

- a. Yes, the cost of background check is totally free for individuals and is 100% paid by the state.

**7. What happens if an individual applicants who has Criminal background?**

- a. An applicant can do aweigh test. The "weigh test" allows people who have a criminal history to continue the important work they do within our health care system. They will have to provide and share their recovery story including a letter of recommendations for reference.

Please Note: See the OEI Website resource list for more information

**8. What happens next after someone gets approved OR Denied by background check Unit?**

- a. If someone is approved, The OEI staff will send a letter notifying you of the approval
- b. If someone is denied, The background check unit will mail them a letter explaining of the decisions for denial



**9. How long is traditional health worker certification good for?**

- a. Traditional health worker certification is good for three years (**36 months**)

**10. When and how does someone needs renew their certification?**

- a. Individuals will need to submit renewal application 60 days before their current certification expires.
- b. They will be required earn and document 20 continuing education hours during their renewal process. All that information can be found on our OHA/OEI Website at <https://www.oregon.gov/oha/oei/Pages/thw-certification.aspx>
- c. They will also do another background check again which takes the same process.

**11. Is any other avenues for individuals with addictions recovery and with criminal records to get certified?**

- a. Yes, Individuals have a choice to be certified through the Addiction Counseling Board of Oregon (ACCBO) which will send the information to OEI.  
<http://www.accbo.com/>

# Now that I am certified...What's next?

<b>What are the requirements set by Medicaid for utilizing a THW for an Oregon Health Plan member?</b>	
<b>Under the Medicaid Waiver, what is the protocol for the supervision of a THW providing direct services to an OHP member?</b>	<ul style="list-style-type: none"> <li>• Supervision: Supervision of THWs, (except PSS/PWS), must be provided by a licensed medical or clinical professional</li> <li>• Care Coordination: Services must be coordinated within the context of a comprehensive, individualized plan of care</li> <li>• Training: Service providers must complete training and certification as defined by the State.</li> </ul>
<b>What about Prevention services? Can CCO's provide THWs to members for preventative care services?</b>	<p><b>Licensed Medical Providers can prescribe a THW</b></p> <p><b>42 CFR 440.130 (c) Rule Change-</b></p> <ul style="list-style-type: none"> <li>• The CMS final rule published on July 15, 2013 included a change to the regulatory definition of preventive services at 42 CFR 440.130(c) of the federal Medicaid program.</li> <li>• Previously, preventive services could only be provided by a physician or other licensed practitioner (OLP) of the healing arts for Medicaid reimbursement</li> <li>• practitioners, OLPs, can provide and be reimbursed for furnishing preventive services <i>recommended by</i> a physician or other licensed practitioner.</li> </ul>

<b>How are THW services paid for under Medicaid?</b>	
Doulas	<i>Licensed medical professional can bill Medicaid at a rate of \$75 per birth for Doula services</i>
CHWs and PHNs	<i>Use of THWs services have some Medicaid codes if they are providing a medical services.</i>

# Now that I am certified...What's next?

	<i>CCO pilot projects, CBOs and Public Health Departments utilize grant funding from various sources,.</i>
PSS and PWS	<p><i>Managed Care/Freedom of Choice Waivers</i>            Section 1915(b) waivers allow for States to implement managed care systems for Medicaid.  <i>Medicaid Rehab Option</i>            Under this option, States can cover “ other diagnostic, screening, preventative, and rehabilitative services. Oregon providers can purchase peer services through additional funding sources such as Federal (SAMHSA), State and Local Funding, TANF, Private funding and Drug Courts (state and local funding, SAMHSA funding, and DOJ funding).</p>

<b>Tips to Maintaining Your Certification</b>	
Continuing Education Requirements	OARs 410-180-0320 requires that THWs must complete 20 hours of Continuing Education training every three years.
Renewal Process for NTHW Certification and Registry Enrollment	According to OARs 410-180-0325, you must complete a renewal application within 30 days of your certificate's expiration date. You will be sent a reminder notice to the email you submitted on your application. Be sure to complete your training requirements as specified above.
Maintain Standards of Professional Conduct	Oregon Administrative Rule 410-180-0340 requires: A certified or provisionally certified NTHW must comply with Standards of Professional Conduct set forth in this rule. The violation of the standards may result in the denial of an application for certification or suspension or revocation of certification.