

## Thursday, May 14

Thursday, May 14  
9:20 am – 9:30 am

### Forum Welcome

**Stepha Dragoon, LMSW, MPAff (she/they) | Oregon Office of Rural Health**

Thursday, May 14  
9:30 am – 10:30 am

### Liberation, Voice and Power: Reimagining Rural Health Through Community-Led Advocacy and Organizational Accountability

**Jayden Ruff (she/her) | South Coast Health Equity Coalition**

Rural communities hold deep wisdom about their own health, yet systemic barriers, historical trauma and inequitable power dynamics often silence their voices. This session explores how liberation and personal power can reshape health experiences for rural populations. Drawing from the work of the South Coast Health Equity Coalition (SCHEC) in Coos and Curry Counties, the presentation shares real examples of residents reclaiming voice and agency, and of organizations transforming to be truly accountable. Participants will learn how SCHEC's community-rooted model builds trust, supports culturally responsive and healing-centered care, and co-designs programs with community members.

*\*This session is sponsored by the Oregon Health Authority*

## Concurrent Sessions

Thursday, May 14  
10:40 am – 11:40 am

### Connected Care for Older Adults: A Promising Model to Achieve Quadruple Aim Goals

**Lindsay Miller (she/her) | Columbia Gorge Health Council**

Connected Care for Older Adults (CCOA) is a pilot program that employs community health workers (CHWs) in primary care clinics to improve care for frail older adults in rural areas. CHWs conduct home visits and implement evidence-backed protocols based on the Age-Friendly Health Systems 4Ms: what matters, medication, mobility and mentation. Now in its third pilot year, CCOA is a promising model to improve the quality of care, health outcomes, provider and caregiver experience, and reduce high-cost, low-value care. This presentation will highlight recent outcomes and share how rural clinics can get involved.

### Creation of a Virtual Age-Friendly Curriculum for Community Health Workers

**Robin Brown, MD (she/her) | OHSU**

**Adi Shafir, MD (she/her) | OHSU**

This presentation will highlight a virtual age-friendly care curriculum for CHWs to increase knowledge and confidence to care for older adults. Through a collaborative statewide needs assessment, we identified the topics and resources of greatest interest to CHWs, then created an eight-hour, asynchronous, free, module-based curriculum anchored in the 4Ms of Age-Friendly Health Systems. Our CHW training model has applicability to other health care and community members and is a promising tool to improve care of rural older adults. This session will highlight the module's development, impact and future direction.

Thursday, May 14  
10:40 am – 11:40 am

## Scaling Rural Therapy Intensives: Outcomes, Workforce Development and Sustainable Funding

Justin Little, LMFT (he/him) | Forage Wellness Collective LLC

Lacey Hawkins (she/her) | Forage Wellness Collective LLC

This session shows how three-day therapy intensives can expand rural system capacity by delivering high-impact care while strengthening the rural workforce pipeline. Using restoration therapy, our recent couples intensive produced measurable improvement for couples across six relationship domains. The program was supported by local private and nonprofit partners, and our upcoming ORH-funded Turning From Anxiety intensive will use the same fidelity structure and is expected to show similar outcomes. Presenters will outline how intensives reduce long-term service utilization, create rich training opportunities, align with OHP's 1115 Waiver, and can be funded through clinic-CCO-nonprofit partnerships.

Thursday, May 14  
10:40 am – 11:40 am

## Growing Public Health from the Ground Up: Rural Workforce Perspectives

Alice Gates, PhD (she/her) | OHSU-PSU School of Public Health

Kelly McNeil, PhD (she/her) | Eastern Oregon University

Jennifer Little, MPH (she/her) | Klamath County Public Health

Sam Arneson, RDH (she/her) | OHSU/PSU School of Public Health

Kali Paine, MPH (she/her) | EOCCO/Moda Health

Dawn Richardson, MPH, DrPH (she/her) | OHSU/PSU School of Public Health

This interactive session examines rural public health workforce development as a population health strategy, positioning the workforce itself as a structural determinant of health. Grounded in first-hand perspectives from rural students, educators and public health leaders, the session draws on early insights emerging from the OHSU-PSU School of Public Health's Rural Public Health Practice Initiative. Panelists will share brief reflections on barriers, opportunities and points of alignment across public health education, employment and community contexts. Facilitators will engage participants in guided discussion to identify shared patterns, examine assumptions together and surface strategies adaptable across rural settings.

*\*This session is sponsored by the OHSU-PSU School of Public Health*

11:40 am – 12:10 pm

## Lunch Break

### Concurrent Sessions

Thursday, May 14  
12:10 pm – 1:10 pm

## Oregon's HERO Kids Registry: Linking Families to Emergency Medical Services and Filling the Information Gap

Brittany Tagliaferro-Lucas, BS (she/her) | Oregon Center for Children and Youth with Special Health Needs

Rachel Ford, MPH (she/her) | Oregon Emergency Medical Services for Children Program

Tamara Bakewell, MA (she/her) | Oregon Center

The HERO Kids Registry is a voluntary, no-cost system that lets Oregon families share critical information about their child's health before an emergency. The information can be accessed by EMS and hospital emergency department providers, ensuring they

have the information they need when they need it. This session will show how HERO Kids supports rural families of children, youth and young adults both with and without special health needs. We will demonstrate its potential as an emergency preparedness tool and introduce the Oregon Health Emergency Protocol, which is available to medical providers to document specific instructions for patient health emergencies.

Thursday, May 14  
12:10 pm – 1:10 pm

### **Wellness Starts at Home: How Home Energy Upgrades Improve Health and Comfort**

**Julia Sinex (she/her) | OHCS Multifamily Energy Program (OR-MEP)**

**Tim Davis (he/him) | OHCS Multifamily Energy Program (OR-MEP)**

Energy-efficient home upgrades do more than lower utility bills; they create healthier homes and communities. Presenters from the Oregon Housing & Community Services Multifamily Energy Program (OR-MEP) will share how home improvements can boost clients' health, comfort and well-being. Attendees will learn practical strategies to reduce asthma and other respiratory triggers, improve mental health and protect against extreme temperatures. Presenters will highlight successful pilot programs and toolkits that bridge the gap between health care and home energy upgrades. This session will empower attendees, including CHWs, with actionable knowledge and tools to help make homes healthier for the communities they serve.

Thursday, May 14  
12:10 pm – 1:10 pm

### **MIH in Action: How Oregon Is Redefining Access to Care**

**Sabrina Ballew, CP-C, NR-P, CHW | Mercy Flights**

Mobile integrated health (MIH) represents a shift in how communities think about access, equity and the role of EMS in a changing health care landscape. MIH programs meet people where they are—bridging gaps in emergency care, behavioral health, chronic disease management and rural access. This presentation highlights the collective work and vision of the Oregon Mobile Integrated Healthcare Coalition and real-world implementation through Mercy Flights. Attendees will explore how local innovation, strong partnerships and supportive policy frameworks are shaping sustainable MIH models that align with value-based care and community need. This session offers both inspiration and practical insight into how MIH is redefining care delivery across Oregon.

## Concurrent Sessions

Thursday, May 14  
1:20 pm – 2:20 pm

### **Avoid the Care Crisis: Strategies to Anticipate and Plan for Increased Care Needs of Older Adults**

**Suvi Neukam, DO, FACP, CPAFH (she/her) | OHSUa**

This session will help providers plan for the increased care needs that come with aging. We will review strategies to anticipate functional needs in older adults both with and without cognitive changes, and examine various approaches to conversations about exploring and accepting increased care support. Presenters will compare and contrast different types of increased care support, including a review of in-home care versus community-based care. Attendees will leave with a better understanding of statewide and national resources for navigating transitions to higher levels of care.

Thursday, May 14  
1:20 pm – 2:20 pm

### **Rural Health's Role in Recognizing and Treating PANDAS/PANS**

**Sarah Lemley, MPA, HA (she/her) | Northwest PANDAS/PANS Network**

### **Kym McCornack (she/her) | Northwest PANDAS/PANS Network**

With a growing number of children experiencing post-infectious neuroinflammatory disorders, it is imperative to equip rural health providers with the education and tools needed to care for this population. Pediatric Acute-onset Neuropsychiatric Syndrome (PANS) and Pediatric Autoimmune Neuropsychiatric Disorders Associated with Streptococcal Infections (PANDAS) are misdirected immune responses, often with an encephalitic onset, that result in acute onset of OCD, tics and/or restricted food intake, along with other neuropsychiatric and somatic symptoms. Early diagnosis and treatment lead to improved outcomes, and up to 30% of childhood mental illnesses may be prevented, according to NIMH. This session will show how rural health providers can diagnose and treat PANDAS/PANS.

Thursday, May 14  
1:20 pm – 2:20 pm

### **Financial Wellness Resources from Oregon DFR: From Financial Preparedness for Disasters to Scam Prevention and More**

#### **Craig Vattiat (he/him) | Oregon Division of Financial Regulation**

This session will explore important consumer protection and financial education resources from the Oregon Division of Financial Regulation, the state regulator for the insurance and financial services industries. Attendees will learn about strategies and tools to help rural Oregonians access consumer advocacy services, make more informed financial decisions, minimize the financial impact of disaster, and prevent scams and financial exploitation.

2:20 pm – 2:35 pm

**Break**

## Concurrent Sessions

Thursday, May 14  
2:35 pm – 3:35 pm

### **Cultivating Compassion: The Oregon Network for Community-Based Serious Illness Support**

#### **Elizabeth Johnson, MA (she/her) | The Peaceful Presence Project**

#### **Erin Collins, MN, RN, CHPN (she/her) | The Peaceful Presence Project**

While palliative care can significantly improve the quality of life for individuals and families living with serious illness, access to this care in rural Oregon can be limited or nonexistent. This session explores how the Peaceful Presence Project addressed the gaps in rural Oregon by building a statewide, community-based support network. This network includes an online directory of end-of-life doulas and CHWs with referral capability, ongoing peer-learning opportunities, and a community engagement program supported by a free online toolkit. These resources create a centralized and coordinated system that connects Oregonians to knowledgeable, compassionate and human-centered support during the final stage of life.

Thursday, May 14  
2:35 pm – 3:35 pm

### **Incredible Equitables: A Team Approach to Championing Rural Health Equity**

#### **Vanessa A. Becker, MPH (she/her) | Douglas Public Health Network**

#### **Kendra Murray, MPH, CHES (she/her) | Douglas Public Health Network**

**Sarah Zia, MPH, MSBA (she/her) | Douglas Public Health Network**  
**Paul Leonard (he/him) | Douglas Public Health Network**

Improving rural health equity takes courage, innovation and team work. Learn about how the team approach at Douglas Public Health Network has resulted in an increased understanding of the complex health disparities and inequities in a rural county, and how that understanding has driven both internal and external programs to improve rural health. Hear how dedicated time, resources, staff FTE and devotion to data-driven programming that is based on identified inequities and disparities have resulted in innovative projects, increased funding, and community education and collaboration.

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Thursday, May 14  
2:35 pm – 3:35 pm

### **The OHSU Mobile Health Coalition: Connecting Oregon Communities to Care**

**Paul Bollinger, MPH (he/him) | OHSU Knight Cancer Institute Community Outreach and Engagement**

**Verian Wedeking (he/him) | OHSU Casey Eye Institute Community Outreach**

The OHSU Mobile Health Coalition, established in 2022, unites mobile health programs to expand preventive and early intervention care. Services include primary care, vision screenings, case management, navigation support, OHP enrollment, mammography, cancer screenings and outreach. This presentation will demonstrate how the coalition centers on health equity, raises awareness, promotes prevention, builds trust through community-based partnerships with providers, CCOs, CBOs, and other agencies to strengthen care statewide, mile after mile.

## Concurrent Sessions

Thursday, May 14  
3:45 pm – 4:45 pm

### **Replicating a Locally Responsive Traditional Health Worker Training Hub**

**Lisa Ladendorff, LCSW, CHW (she/her) | Northeast Oregon Network**

**Cami Miller, CHW, PSS (she/her) | Northeast Oregon Network**

**Rosie Strange (ewa/they/two spirit) | Columbia Gorge Health Council**

Participants in this session will walk away with an understanding of the landscape of barriers to traditional health worker (THW) training in rural areas. Participants will become familiar with the process of articulating their own local needs for training for CHWs, peer wellness specialists, peer support specialists, youth and family peers, doula and other THWs. This presentation will walk through the options to join an existing training hub, as well as high level steps to create their own training hub model, including steps needed to train trainers and implement fidelity.

Thursday, May 14  
3:45 pm – 4:45 pm

### **Five Fundamentals to Succeed in Value-Based Payment**

**Evan Saulino MD, PhD (he/him) | Comagine**

**Kelly McGrath, MD (he/him) | St. Mary's Clearwater**

**Dave Ross (He/Him) | Comagine**

Given the financial instability in rural health care, continued growth in value-based pay (VBP) and an explosion of point-solution products, including AI, we risk increasingly expensive, complex interventions with variable function and unsustainable results. To help clinical organizations avoid this, this presentation will outline five functional strategies they can follow, regardless of their size, structure or technology products.

Presenters will highlight concrete examples from clinical and community organizations working to improve patient care quality, outcomes and engagement.

Thursday, May 14  
3:45 pm – 4:45 pm

### **Why Public Health Partners and Communities Should Care About SHIP and CHIPs**

**Cintia Vimieiro, MGH (she/her/ella) | OSPHD – Oregon Health Authority**

Oregon's State Health Improvement Plan (SHIP) identifies statewide public health priorities shaped with input from community members, Tribal representatives, local public health authorities, CCOs and other partners. The SHIP outlines four priority areas to support health for all people of all ages and in all places in Oregon. Certain partners play key roles in carrying out SHIP strategies, especially in rural and frontier regions. This session highlights how the SHIP and locally driven community health improvement plans (CHIPs) can align to strengthen shared goals.

*\*This session is sponsored by the Oregon Health Authority*

## Friday, May 15

Friday, May 15  
9:00 am – 10:00 am

### **Deconstructing Trauma: Integrating Harm Reduction and Prevention for Lasting Recovery**

**Renee Frye (she/her) | Sacred Sol Healing Institute**

This session reframes trauma not as a fixed condition, but as an experience that can be understood and addressed through trauma-responsive care. Participants will explore how trauma affects the nervous system, behavior and recovery, and how harm reduction and prevention strategies can be integrated to support lasting recovery. This session blends evidence-based practices with holistic and culturally responsive approaches to address root causes of trauma, strengthen emotional regulation and reduce relapse risk. Designed for rural and low-resource settings, the session offers practical, transferable strategies that providers and community programs can implement to build resilience.

## Concurrent Sessions

Friday, May 15  
10:10 am – 11:10 am

### **How Self-Reported Understanding Undermines Individual and Population Health**

**Cliff Coleman, MD, MPH (he/him) | Oregon Health & Science University**

Patients with lower health literacy are typically motivated to appear as if they understand information from their health care providers, even when confused. This talk uses empirical data and real-world examples to expose the various ineffective means health care personnel use for assessing patients' understanding, including watching body language, asking if there are any questions and relying on patients' self-reported HCAHPS survey data. The presentation focuses on the use of teach-back as an evidence-based, solutions-oriented approach to knowing what patients and caregivers understand, and proposes a systems-level approach to adopting teach-back for achieving a broad array of improved outcomes.

Friday, May 15  
10:10 am – 11:10 am

### **Integrating Health Care Into Housing: The Impact of Embedded Nursing on Well-being and Care Coordination**

**Deb Fellcarlson, BSN, RN, MSPH (she/her) | Faith Community Health Network**

**Marcy Shanks, MSN, RN, MEd (she/her) | Faith Community Health Network**

Explore the preliminary findings from a small group of nurses in east Linn County who are penetrating systemic barriers to health care access by staffing a health resource center in a low-income senior/disabled housing complex. Coordination and collaboration with local faith communities, the local housing authority, CCO and health system, as well as educational institutions and other CBOs, are bringing much needed services to these residents, almost half of whom were homeless prior to moving in. Learn about the implementation process that led to real-world nursing interventions, prevention of unnecessary ambulance calls and hospitalizations, establishing contact with providers, and connecting residents to essential resources.

Friday, May 15  
10:10 am – 11:10 am

### **Empowering Traditional Health Workers: Cancer Education Training for THWs**

**Carina Garcia, BA (she/her) | OHSU Knight Cancer Institute's Community Outreach & Engagement**

**Paige Farris, MSW (she/her) | OHSU Knight Cancer Institute's Community Outreach & Engagement**

THWs are trusted individuals from their local communities who may also share socioeconomic ties and lived experiences with the communities they serve. They have historically provided care by bridging communities and the health systems and organizations that serve them. THWs can be utilized to improve patient resource navigation along the cancer care continuum, including prevention and screening strategies. Oregon's comprehensive cancer control plan highlights areas that reflect disparities throughout Oregon as follows: liver, breast, colorectal, lung and HPV-related cancers. Learn how THW training in these areas can better equip communities to address disparity with regionally-specific, culturally-responsive action items.

### **Concurrent Sessions**

Friday, May 15  
11:20 am – 12:20 pm

### **Trauma-Informed Care with Rural Populations**

**Thomas Pitts (he/him) | Valley Family Health Care**

Trauma is both a technical term and, increasingly, a term that is entering the realm of pop psychology; PTSD follows closely behind, with too many TikTokers citing their PTSD as rationale for any behavior. Through the lens of professional counseling, PTSD is a mental health challenge characterized by the pervasive impact of accumulated trauma across the lifespan, requiring at least one exposure to a severely threatening event without adequate support. PTSD and trauma deserve special consideration in health care, as depressive, anxiety and even some personality disorders may be better explained through a trauma-focused lens. This session will share how trauma-informed care understands, acknowledges and addresses the body's stress response and show attendees how all helping professionals can help high-trauma populations notice and regulate their stress response.

Friday, May 15  
11:20 am – 12:20 pm

### **Bridging the Gap: EMS Training Expands Rural Access to Life-Saving Opioid Use Disorder Treatment**

**Dre Cantwell-Frank, NRP (she/her) | The Bridge Center at PHI**

**Emily Henke, MPH, BA (she/her) | Oregon Public Health Institute**

This session details the EMS Bridge Train-the-Trainer curriculum that was piloted in rural Oregon to address the critical lack of opioid use disorder (OUD) treatment access. The curriculum helps EMS personnel learn to recognize opioid withdrawal, safely

administer medication and train colleagues to do the same. The eight-hour, in-person course, supported by technical assistance, rapidly built local expertise; 90% reported improved mastery and 100% gained confidence in buprenorphine administration. With additional funding now secured, this model is poised to revolutionize opioid crisis response and increase access to life-saving care in rural areas.

Friday, May 15  
11:20 am – 12:20 pm

### **POLST: What is it? Who needs one? How does it work?**

**Christine Mullowney, MD (she/her) | Oregon POLST Program & Oregon POLST Coalition**

This session is for anyone who discusses or practices end-of-life care planning with care teams, patients or their loved ones. A Portable Orders for Life-Sustaining Treatment (POLST) form transforms a patient's treatment plan and goals of care into a set of medical orders. These out-of-hospital orders apply to emergency medical personnel, including EMTs, paramedics and emergency department staff, as well as long-term care and nursing facility staff. Emergency medical personnel provide CPR by default, and that can often include intubation. A POLST can instruct them not to provide otherwise mandatory resuscitation during a medical crisis. Learn how to explain the purpose and intention of POLST to a variety of audiences.

Friday, May 15  
12:20 pm – 12:50 pm

### **Lunch Break**

Friday, May 15  
12:50 pm – 1:50 pm

### **Resource Fair: Mini Presentations**

## **Concurrent Sessions**

Friday, May 15  
2:00 pm – 3:00 pm

### **A Rural Case Study: Community-Driven Approaches to Increase Awareness of Diabetes Prevention Programs**

**Genevieve Martinez Garcia, PhD (she/her) | ICF Next**

Type 2 diabetes disproportionately affects rural and frontier populations, yet evidence-based programs like the National Diabetes Prevention Program often face low awareness, partly due to lack of relevant messaging, limiting enrollment. This session will explore the use of community-based participatory research and social marketing to design a tailored diabetes prevention campaign. Surveys and workshops with local health care and community partners identified preferred communication preferences and messaging barriers, and informed the development of a multi-channel awareness and prevention campaign. This approach demonstrates how community-driven strategies and adaptive recruitment can advance health equity and link communities to essential diabetes prevention resources.

Friday, May 15  
2:00 pm – 3:00 pm

### **Understanding Oregon's Rural Community Mental Health Needs for Children and Families**

**Andromeda Blair (she/her) | Pacific University**

**Halle Bakir (she/her) | Pacific university**

We conducted interviews with rural Oregon child mental health providers and partners to assess and understand the barriers and facilitators of providing care to

rural families and children at the structural and community level. This presentation will share the preliminary qualitative results from interview participants in varying roles across the field of rural mental health. These participants disclosed structural barriers to care, including workforce shortages and provider burnout, as well as access to internet and technology, cost of care, transportation limitations and parental involvement. We will also cover the successes reported by participants, including the ability to provide home visits, the use of parent-child interction therapy (PCIT), communication among communities and providers, and the presence of trainings.

Friday, May 15  
2:00 pm – 3:00 pm

### **Delivering Oral Health in Rural Oregon: Mobile Dentistry in Behavioral Health and Recovery Settings**

**Destyne Johnson, EPDH (she/her) | Capitol Dental Care**

**Alyssa McClain, EPDH, CHW (she/her) | Capitol Dental Care**

This panel highlights a dental-led rural care model that brings preventive oral health services directly into communities through mobile dentistry and CHW-driven outreach. An expanded practice dental hygienist (EPDH) and dental CHW will share how they deliver on-site care in behavioral health clinics and recovery sites by using teledentistry, flexible workflows and REALD-informed strategies. A behavioral health partner will provide the community site perspective, describing how their organization supports scheduling and patient coordination when dental services arrive on-site. Presenters will offer trauma-informed approaches, case examples and practical action steps that attendees can use to replicate dental-centered mobile programs in rural areas.