

CONFEDERATED TRIBES OF THE CHEHALIS RESERVATION

DBA: CHEHALIS TRIBAL WELLNESS CENTER (CTWC)

GROUP HEALTH FUNDING 2018

With that in mind, here are our requests and expectations for your paper/presentation:

- Please limit your paper to six pages, including all attachments and appendices.
- Please limit the description of your organization, mission, and program(s) to one or two paragraphs.
- Please address the following questions:
  1. How have you engaged, convened, and maintained relationships with your community/communities?

***As a Tribal Community Health Center we are most Tribal Member's Medical home and we are involved in the community on a daily basis. We have a monthly newspaper we submit information and articles as well as a daily email distribution announcement page. We also hold a lot of community events surrounding health and wellness.***

2. How have you co-designed or co-created solutions with your community/communities?

***On a daily basis issues are brought before us either by community members, other Tribal programs or our business committee. We have a strong working relationship with all and we work together on a solution.***

3. How have you addressed systematic inequities that affect health (such as power differentials or racism) as part of your community engagement work? ***Being a Tribal Facility we don't have a racism problem and we do deal with perhaps power struggles with Tribal patients feeling like this is their clinic and they will tell us what their health needs are but we have a good team and work with the patient or families for resolve quickly.***

4. What about your organization's way of working has made you successful? How has your organizational culture or structure changed to allow for authentic community relationships? Include examples of how your staff and your board (if relevant) contributed to the culture and values that enabled your success. ***I have attached our working document process for our outreach team. We recognized that we do well in helping those who come through our doors, but we still know we have a 25-30% population that does not come in for services. We know a majority of those may have addiction or mental health issues and barriers to not coming in. So, we decided to start an outreach team to go and find them and start addressing their chronic health needs as well as mental health and addiction issues.***

5. What have been your most significant challenges, obstacles, and missteps? We know that we can learn as much from setbacks as we can from successes, so please don't hold back! (If you are concerned about sharing challenges publicly, just let us know and we will omit your response to this question from the version we share publicly.) ***We have learned if we approach addicts with the idea of stopping their drug/alcohol use they often times will shut us down because they hear that on a daily basis from their family or loved ones. Our approach will be to first gain their trust. We won't address the addiction issue up front but that will be our end goal. We feel once they trust us and let us address their health and dental issues maybe we can work towards treatment. Our type process is screening for and treating Hep C. Our staff have recently taken the Hep C training and we will be treating it in-house.***

6. What changes have you seen that give you hope about a future that is more equitable?

***The more we implement and the more excited we get, the more the community and leaders engage with us and our project. I have given our presentation to the local ACH and people from outside agencies are really excited about our project and how they can partner with us.***