



**NORTHWEST  
PORTLAND  
AREA  
INDIAN  
HEALTH  
BOARD**

Burns-Paiute Tribe  
Chehalis Tribe  
Coeur d'Alene Tribe  
Colville Tribe  
Coos, Siuslaw, &  
Lower Umpqua Tribe  
Coquille Tribe  
Cow Creek Tribe  
Cowlitz Tribe  
Grand Ronde Tribe  
Hoh Tribe  
Jamestown S'Klallam Tribe  
Kalispell Tribe  
Klamath Tribe  
Kootenai Tribe  
Lower Elwha Tribe  
Lummi Tribe  
Makah Tribe  
Muckleshoot Tribe  
Nez Perce Tribe  
Nisqually Tribe  
Nooksack Tribe  
NW Band of Shoshoni Tribe  
Port Gamble S'Klallam Tribe  
Puyallup Tribe  
Quileute Tribe  
Quinalt Tribe  
Samish Indian Nation  
Sauk-Suiattle Tribe  
Shoalwater Bay Tribe  
Shoshone-Bannock Tribe  
Siletz Tribe  
Skokomish Tribe  
Snoqualmie Tribe  
Spokane Tribe  
Squaxin Island Tribe  
Stillaguamish Tribe  
Suquamish Tribe  
Swinomish Tribe  
Tulalip Tribe  
Umatilla Tribe  
Upper Skagit Tribe  
Warm Springs Tribe  
Yakama Nation

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**RESOLUTION # 20-04-02**

**SUPPORT FOR CREATION OF A PORTLAND AREA  
COMMUNITY HEALTH AIDE PROGRAM CHAP  
CERTIFICATION BOARD**

**WHEREAS**, the Northwest Portland Area Indian Health Board (hereinafter “NPAIHB” or the “Board”) was established in 1972 to assist Tribal governments to improve the health status and quality of life of Indian people; and

**WHEREAS**, the Northwest Portland Area Indian Health Board is a “Tribal organization” as defined by the Indian Self-Determination and Education Assistance Act (P.L. 93-638 seq. et al) that represents forty-three federally recognized Tribes in the states of Idaho, Oregon, and Washington (“member tribes” or “Portland Area Tribes”); and

**WHEREAS**, in accordance with the definitions of the Indian Self-Determination and Education Assistance Act at 25 USCS § 450b, a Tribal organization is recognized as a governing body of any Indian Tribe and includes any legally established organization of Indians which is controlled, sanctioned, or chartered by such governing body or which is democratically elected by the adult members of the Indian community to be served by such organization and which includes the maximum participation of Indians in all phases of its activities; and

**WHEREAS**, the Northwest Portland Area Indian Health Board is dedicated to assisting and promoting the health needs and concerns of Indian people and its member tribes; and

**WHEREAS**, American Indians and Alaska Natives (AI/AN) have very limited access to health care services and are disproportionately affected by oral and behavioral health disease and these disparities are directly attributed to the lack of dental and behavioral health professionals in Indian communities, which has caused a serious access issue and backlog of dental and behavioral treatment among AI/AN people; and

**WHEREAS**, many of our member tribes have great difficulty and face significant challenges in recruiting medical, dental and behavioral health professionals to work in their communities that results in further challenges in ensuring comprehensive health care for tribal members; and

**WHEREAS**, the Alaska Community Health Aide Program (CHAP) has been in existence since 1964 as a program of the Indian Health Service (IHS); and

**WHEREAS**, the federally authorized Community Health Aide Program Certification Board (CHAPCB) was established and charged with formalizing the process for maintaining Community Health Aide/Practitioner training and practice standards and procedures; and

**WHEREAS**, CHAP has been an effective method for diminishing the health disparities of Alaska Natives by promoting access to health services for Alaska Natives residing in rural and remote communities; and

**WHEREAS**, CHAP grows midlevel providers from within Tribal communities who provide patient-centered, culturally relevant, quality care that comes from providers that understand the history, culture and language of their patients; and

**WHEREAS**, CHAP provides patient-centered primary care and delivers more care in the community rather than an acute care setting; and

**WHEREAS**, CHAP provides routine, preventative and emergent health care through Community Health Aides (CHA/Ps), Behavioral Health Aides (BHA/Ps), and Dental Health Aide Providers (DHA/Ts); and

**WHEREAS**, CHAP providers provide continuity of care in communities that face recruitment and retention challenges; and

**WHEREAS**, on July 2, 2022, Department of Health and Human Services issued the Indian Health Service Circular No. 20-06 for the CHAP with the purpose of implementing, outlining, and defining a national CHAP policy for the contiguous 48 states (Circular No. 20-06); and

**WHEREAS**, Circular No. 20-06 implements the statutory requirements of the Indian Health Care Improvement Act (IHCA) that apply to CHAPs operated by the Indian Health Service (IHS) and Indian Self-Determination and Education Assistance Act (ISDEAA) contractors outside of Alaska; and

**WHEREAS**, Portland Area Tribes have established and continue to implement CHAP within our member tribes; and

**WHEREAS**, our member tribes would benefit from the existence of a Portland Area CHAP Certification Board (PACCB) for certification of CHA/Ps, BHA/Ps, and DHA/Ts as outlined in Circular 20-06 for CHAP Expansion to the lower 48 Tribes; and

**WHEREAS**, the NPAIHB CHAP Board Advisory Workgroup has spent the previous two years laying the foundation for PACCB.

**NOW THEREFORE BE IT RESOLVED** that the Northwest Portland Area Indian Health Board supports the creation of a Portland Area CHAP Certification Board (PACCB); and

**BE IT FURTHER RESOLVED** that the Northwest Portland Area Indian Health Board supports the development of the PACCB with federal baseline standards for consistency of services provided by any CHAP program.

## **CERTIFICATION**

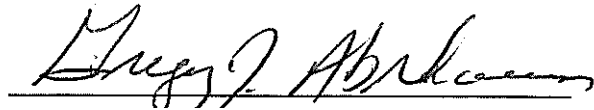
NO. 20-04-02

The foregoing resolution was duly adopted at Virtual Zoom Meeting of the Northwest Portland Area Indian Health Board on July 14 – July 15, 2020. A quorum being established; 24 for, 0 against, 0 abstain on July 15, 2020.



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Chairman



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Secretary