

Joe Lombardo
Governor

Laura Rich
Director



DEPARTMENT OF HUMAN SERVICES



NEVADA DIVISION of PUBLIC
and BEHAVIORAL HEALTH



Andrea R. Rivers,
*MS
Administrator*

Ihsan Azzam,
*Ph.D., M.D.,
Chief Medical
Officer*

KIDNEY DISEASE ADVISORY COMMITTEE

MEETING AGENDA
REGULAR MEETING
July 9, 2026

1:30 p.m. until Adjournment

This meeting is being held virtually. The public are invited to attend.

VIRTUAL INFORMATION

How To Participate

Meeting Link:

Microsoft Teams

[Join the meeting now](#)

Meeting ID: 287 275 605 000

Passcode: Sh957Rm6

Join by phone:

[+1 775-321-6111, 678364365#](#) United States, Reno

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For organizers: [Meeting options](#) | [Reset dial-in PIN](#)

NOTICE:

1. The agenda items may be taken out of order.
2. Two or more items may be combined; and
3. Items may be removed from the agenda or delayed at any time.

1. **Call to Order and Roll Call**

2. **Public Comment:** No action may be taken on a matter raised under public comment unless the matter itself has been specifically included on an agenda as an action item.

To provide public comment telephonically, dial, [+1 775-321-6111](tel:+17753216111). When prompted to provide the meeting ID enter [678364365#](tel:678364365#). Due to time considerations, comments will be limited to five (5) minutes per person. Members of the public utilizing the call-in (audio only) number may raise their hands by pressing *5. Persons making comments will be asked to begin by stating their name for the record, spell their last name, or provide Anais Infante, a.infante@health.nv.gov, with written comments.

3. **For Information Only:** Committee Chair will invite Committee members to present on information of importance for themselves, families, or their individual agencies. Action may not be taken on any item provided as an update.
4. **For Possible Action:** Discussion and possible action to approve the meeting minutes from April 9, 2026.
5. **For Information Only:** Welcome Dr. Jared to the KDAC committee.
6. **For Possible Action:** Discussion and possible action to review and approve applications to the KDAC committee.
7. **For Possible Action:** Discussion and possible action on grant opportunities and deadlines.
8. **For Possible Action:** Discussion and possible action regarding future agenda items.
9. **Public Comment:** No action may be taken on a matter raised under this item unless the matter is included on an agenda as an item upon which action may be taken. To provide public comments telephonically, dial [1-775-321-6111](tel:17753216111). When prompted to provide the meeting ID, enter [678 364 365#](tel:678364365#). Due to time considerations, comments will be limited to five (5) minutes. Members of the public utilizing the call-in (audio only) number may raise their hands by pressing * 5. People making comments will be asked to begin by stating their name for the record and spelling their last name, or provide Anais Infante, a.infante@health.nv.gov, with written comments.
10. **Adjournment**

NOTICES OF THIS MEETING WAS POSTED AT THE FOLLOWING LOCATIONS:

Physical Posting Locations

- Nevada Division of Public and Behavioral Health: 4150 Technology Way, Carson City, NV 89706
- Nevada Division of Public and Behavioral Health: 4126 Technology Way Carson City, NV 89706
- Nevada Health Authority (Las Vegas Office): 500 E Warm Springs Rd, Las Vegas, NV 89119

Internet Postings

- The Nevada Division of Public and Behavioral Health website at <https://www.dpbh.nv.gov/boards/cwcd-committee-home/2026-cwcd--kdac-meetings/> and the Department of Administration's website at <https://notice.nv.gov/>

It is the goal of this body to afford the public a comment period in compliance with the minimum requirements of the Open Meeting Law prior to adjournment. This body provides at least two public comment periods. No action may be taken on a matter raised under public comment unless the item has been specifically included on the agenda as an item upon which action may be taken. The Chair retains discretion to only provide for the Open Meeting Law's minimum public comment and not call for additional item-specific public comment when it is deemed necessary by the Chair to the orderly conduct of the meeting.

This meeting is a public meeting, recorded and held in compliance with and pursuant to the Nevada Open Meeting Law, pursuant to NRS 241. By participating, you consent to recording of your participation in this meeting. All voting members should leave their cameras on for the duration of the meeting and refrain from entering any information into the chat function of the video platform.

The agenda and meeting information was mailed to groups and individuals as requested. If you need supporting documents for this meeting, please notify Anais Infante, Division of Public and Behavioral Health, Bureau of Child, Family and Community Wellness, at (775) 684-2202 or by email at a.infante@health.nv.gov.

If at any time during the meeting a person intending to present on an agenda item cannot do so or is having technical difficulties, please reach out to Anais Infante, at (775) 684-2202, or by email at a.infante@health.nv.gov referencing the agenda item number, what time the difficulty started, and their intent to participate should the agenda item be moved to another time, date, or addressed otherwise.

Please be cautious and do not click on links in the chat area of the meeting unless you have verified that they are safe. If you ever have questions about a link in a document purporting to be from KDAC, please do not hesitate to contact a.infante@health.nv.gov. Please refrain from commenting in the chat area of the meeting, unless requested to, because minutes are required to be taken of the meeting.

Use of obscenities or other behavior which disrupts the meeting where it cannot be conducted properly may result in the forfeiture of the opportunity to provide public comment or removal from the meeting.

Additionally, anyone who would like to be on the mailing list must submit a written request every six (6) months to the Nevada Division of Public and Behavioral Health at the address listed below.

KDAC, DPBH, Attn: Anais Infante
4150 Technology Way, Suite 210
Carson City, Nevada, 89706

If you would like to receive updates and agenda postings directly through email, please register for the Kidney Disease Advisory Committee Listserv by sending an email to the following link:

KDAC-Subscribe-request@listserv.state.nv.us

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KIDNEY DISEASE ADVISORY COMMITTEE (KDAC)

DRAFT MEETING MINUTES

Date: April 9, 2026

Time: 1:30 PM - Adjournment

Location: Virtual via Microsoft Teams

ATTENDEES:

Members Present:

Dr. Krista Schonrock, Chair
Dr. Larry Lehrner
Rayleen Earney

Members not Present:

Beth Britton
Katrina Russell

Others Present:

Rory Fuller, DPBH CDPHP, Meeting Staff
Amber Hise, CDPHP Section Manager
Anais Infante, CDPHP
Michelle Harden, CDPHP
Darlene Douthitt, CDPHP
Godwin Nwando, CDPHP
Yanyan Qiu, CDPHP
Lori Taylor, CDPHP

Tammera Brower, DPBH
Anakaren Lamas, CDPHP
Dillon Winkelman, CDPHP
Imran William, CDPHP
Troy Lovick, CDPHP
Oscar Fernandez, CDPHP
Vickie Ives, CFCW, DPBH

AGENDA ITEMS:

1. Call to Order and Roll Call

Rory Fuller called the roll and confirmed quorum; three (3) members present and two (2) absent.

2. Public Comment: First public comment period

No public comments were made during this period. Dr. Krista Schonrock closed the public comment period.

3. For Possible Action: Discussion and possible action to approve the meeting minutes from January 8, 2026.

Rayleen Earney moved to approve the January 8, 2026, minutes, seconded by Dr. Larry Lehrner. Motion passed unanimously.

4. For Possible Action: Discussion and possible action to review and approve applications to the KDAC committee.

Dr. Krista Schonrock asked Michelle Harden to share information about new or existing applicants of the Kidney Disease Advisory Committee (KDAC).

Michelle Harden responded that Dr. George Jarad had applied, and his acceptance letter and orientation packet were routing through the approvals process. She anticipates Dr. Jarad's appointment to the committee will be finalized by the next quarterly meeting.

Michelle Harden encouraged anyone who is interested to inquire with herself, Rory Fuller, or Amber Hise. Agenda Items:

5. For Possible Action: Discussion and possible action to add grant funding as a standing agenda item.

Dr. Larry Lehrner asked the committee if there was advantage to having a standing item rather than only having applied to the agenda after information is found.

Michelle Harden responded that with a standing agenda item, suggestions for funding may be brought up without formal inclusion withing the KDAC meeting packet.

Rayleen Earney noted there were no federal funding opportunities, and each committee member of the KDAC has knowledge and expertise in other areas beside federal grants. There was also a request for information made to Rayleen Earney by a Nevada state affiliate about the funding opportunities that appeared in the April 9 meeting agenda. She noted that the state affiliates with whom she spoke were not on the call.

Rayleen Earney moved to include adding grant funding as a standing agenda item. Dr. Lehrner seconded. The motion passed unanimously.

6. For Discussion and possible action: Grant funding opportunities and updates. The Committee will discuss grant funding opportunities relevant to kidney disease activities, including ongoing and new initiatives, and may take action to identify next steps, assign tasks, or recommend potential partners. Continued discussion on non-traditional or non-federal grant avenues including:

- Novo Nordisk Corporate Giving: Specific Health Awareness Campaigns
 - https://www.cybergrants.com/pls/cybergrants/ao_survey.form?x_gm_id=8712&x_section_id=1687380&x_quiz_survey_id=76602
- Lions International Foundation Diabetes Grants
 - https://cdn2.webdamdb.com/md_oNZgWkdyvg88.jpg.pdf?v=1
- Eli Lilly Grants
 - <https://grantoffice.lilly.com/areas-of-focus>
 - [FAQ | Independent Healthcare Grants | Lilly Grant Office](#)
- Abbott's Commitment to People Living with Diabetes
 - <https://www.diabetescare.abbott/purpose/our-promise.html>
- Other grant funding ideas or updates

Rayleen Earney informed the committee primarily of the Novo Nordisk grant. The Novo Nordisk grant would focus on diabetes or related diseases. Kidney disease would be considered a related disease. Related campaigns, activities, and community events may qualify for an estimated grant allotment of \$100,000.

Rayleen Earney relates her experience as a previous member of the Lions Club which included community events such as foot and vision screenings. The Eli Lilly grant and the Abbott's grant appeared to be similarly structured as the Novo Nordisk grant.

Rayleen Earney noted that agencies may not have the capacity to run campaigns or activities themselves, but they could identify key partners to execute initiative and economize any grant awarded.

Dr. Krista Schonrock confirmed through experience the Abbott's grant is like the Novo Nordisk grant. She agreed that the Abbott's grant would focus on diabetes, but kidney disease may qualify because it is a complication of diabetes. She has had difficulties connecting with their community partners but would keep trying through other resources.

Rayleen Earney may have contacts within the Lions International Foundation that she would share with the committee. As an aside, she mentioned that Katrina Seipp-Lewington from CoMagine Health had expressed interest in joining the KDAC.

Michelle Harden recognized that funding specifically for kidney disease is limited. She named Darlene Douthitt, Chronic Disease Prevention and Health Promotion's (CDPHP) diabetes coordinator, and Troy Lovick, CDPHP's cardiovascular coordinator as resources for how CDPHP might be able to fit kidney disease programming into the section's work. She asked the committee what their vision was for applying and receiving private funded grants.

Dr. Krista Schonrock suggests continued collaboration with cardiovascular disease and diabetes with kidney disease as a supporting factor.

Godwin Nwando expressed interest in being introduced to contacts within the Lions Foundation and funding from the Lions Foundation and Novo Nordisk would be useful especially within the diabetes program. Building a program on diabetes screenings such as the ones Rayleen Earney experienced

would be of interest to Godwin Nwando. He indicated that staff or community partners may be able to execute these screenings.

Troy Lovick indicated that within the cardiovascular disease program, awarded grants are asking for focus to be placed on diagnosing and controlling high blood pressure. Although high blood pressure is the leading cause of kidney disease, he indicates that there is a need for funding, but the workforce is available for immediate action if funding were to become available.

Rayleen Earney named creating tailored flyers, social media campaigns, and attendance of community events as possible ways to meet grant deliverables.

Troy Lovick suggested a collaboration between the KDAC and the Cardiovascular Learning Collaborative to explore opportunities with the American Heart Association.

Dr. Krista Schonrock asked to confirm that what was suggested was partnering with the cardiovascular program, the diabetes program, and the community health.

Godwin Nwando responded in the affirmative. Staff will investigate Novo Nordisk and Lions International Foundation and report back with findings at the next scheduled meeting. Staff will also provide opportunities for the KDAC to collaborate with the Cardiovascular Learning Collaborative. He mentioned working with Ms. Seipp-Lewington of CoMagine Health directly, in the case of the cardiovascular program, and indirectly, in the case of the diabetes program, and would be interested to see her become involved with the KDAC.

Rayleen Earney reached out to Ms. Seipp-Lewington but did not know where or how communication was lost. She offered to reach out again and request her curriculum vitae for meeting review.

Dr. Krista Schonrock surmised that a plan had been formed and asked if the plan was enough or if a vote needed to be held.

Michelle Harden advised a vote would be proper procedure.

Rayleen Earney noted not all funding sources provided were talked about equally. She asked if the sources that were not touched on with detail would still be explored.

Michelle Harden asked if the KDAC's intention was for CDPHP to gather information or to gather information and apply to grants. She sought clarification on what would be expected of staff for the new grant funding opportunities standing agenda item.

Godwin Nwando offered to provide investigation updates during the agenda item.

Dr. Krista Schonrock requested the following be noted when providing updates on grants: details on the grant, whether there is a financial match, and how it would connect to ongoing activities. She would like to see four or five grants in detail.

Michelle Harden suggested that staff focus on identifying if a grant is a good fit. Exploration may benefit more than just CDPHP. She asked if the KDAC would prefer CDPHP to take immediate action to apply for grants if it is feasible to do so or if CDPHP would gather the information to present to the KDAC.

Vickie Ives advised that without following the proper channels and guidelines, CDPHP could not apply or bring in funds for the KDAC. She suggested that staff may collect information to present to the committee.

Dr. Krista Schonrock requested that staff take as much action as is allowable under official guidance.

Rayleen Earney moved to allow staff to investigate the grants that would be a good fit for program alignment and to take as much action as is allowable under official guidance. Dr. Krista Schonrock seconded. The motion passed unanimously.

7. Public Comment: Second public comment period

No public comment was made during this period.

8. Adjournment:

Rayleen Earney moved to end the meeting. Dr. Krista Schonrock seconded. The motion passed unanimously. The KDAC meeting ended at 2:22 PM.

Next meeting:

July 9, 2026

1:30 PM – Adjournment

Location: Virtual via Teams

Quarterly meeting

Minutes prepared by Barbara Bessol using the following reference.

Robert, H. (2020). *Robert's rules of order: Newly revised (12th ed.)*. Da Capo Press.

Nevada Revised Statutes. *Open Meeting Law (NRS 241)*.

Katrina Seipp-Lewington, MPH

Director, Community Health

Skills Summary

Katrina Seipp-Lewington, MPH serves as the Director, Community Health at Comagine Health, where she leads community engagement and collaborates with multi-partner initiatives to foster system-level change and drive collective action. She draws upon her quality improvement and public health expertise to foster relationships among a diverse set of partners to address complex challenges. Her work at the local, state and regional level leading cooperative agreements with the Centers for Disease Control and Prevention (CDC) and the Administration for Community Living (ACL) focus on the development of community care hubs and the implementation of sustainable evidence-based health education infrastructure. She has a background in community organizing, quality improvement, and forging clinical-community relationships. With a strong commitment to partnership, collaboration, and equity, Katrina is dedicated to achieving a shared vision of improved health for all communities.

Education

2014	Master of Public Health	Portland State University	Portland, OR
2012	Bachelor of Arts in Community Health Minor in International Relations	Carroll College	Helena, MT

Certifications and Training

2024	Facilitative Leadership		Interaction Associates
2019	Lifestyle Coach	National Diabetes Prevention Program	Diabetes Training and Technical Assistance Center with Oregon Wellness Network Certifying/Training Entity
2017-2019	Certified Lead Trainer	Diabetes Empowerment Education Program	Midwest Latino Health Research, Training, and Policy Center at the University of Illinois
2017	Peer Leader	Diabetes Self-Management Program	Self-Management Resource Center with Northwest Senior and Disability Services
2017	Leadership and Organizing for Action		Quality Innovation Network National Coordinating Center with Rethink Health

Professional Experience

2023-present | Director, Community Health | Comagine Health| Seattle, WA

- Primary Investigator overseeing program teams, strategic approach and activities, day-to-day operations, budgets, and national evaluation activities for Comagine Health's CDC Cooperative Agreement, A Strategic Approach to Advancing Health Equity for Priority Populations with or at Risk for Diabetes in High Needs Counties in Nevada and Oregon through Community Integrated Health Networks
- Served as Program Director for two federal Administration for Community Living Cooperative Agreements directing day-to-day operations and strategic approach and activities
 - 2021 ACL Cooperative Agreement to Grow the Community Integrated Network of Oregon to Deliver and Sustain Evidence Based Chronic Disease Self-Management and Support Programs.

- 2022 ACL Cooperative Agreement to Empower Older Adults and Adults with Disabilities through Chronic Disease Self-Management Education Programs through the Wellness Integrated Network of Oregon
- Lead the design, implementation, and facilitation of innovative partnerships to bring together diverse partners and foster relationships across the public health and health care landscape to address complex challenges and inequities
- Effective leader and manager supervising staff who work closely with community-based organizations and health system partners on quality improvement initiatives.
- Leads strategy and policy change recommendations to implement or operationalize Medicaid coverage for evidence-based health promotion and lifestyle change programs.
- Oversees program staff and activities to ensure timely and efficient execution of all required deliverables including coordinating requirements, developing, and negotiating contracts, integrating contract requirements with business operations, and ensuring work stays within budget.

2022-2023 | Manager, Community Health | Comagine Health | Seattle, WA

- Served as the Oregon state lead, managed regional team coordination, and supported day-to-day operations for Comagine Health's CDC 1705 Cooperative Agreement to Scale the National Diabetes Prevention (DPP) Program in underserved areas of New Mexico, Oregon, and Utah. Oversaw program activities, strategic approaches, and provided technical assistance to six affiliates providing the National DPP and Medicare DPP, developed and implemented subcontracts, convened, and facilitated multi-partner conversations to address systemic challenges with scaling the National DPP, and designed and implemented new strategies to identify, engage and retain participants in the National DPP.
- Managed and administered contracts with three state public health agencies to achieve their state diabetes, heart disease, and stroke goals. Provided strategy consultation, oversaw strategy development, customized technical assistance to accredited diabetes self-management education programs and National DPP recognized organizations, convened a statewide network of diabetes self-management education sites, and implemented clinical-community referral pilots for diabetes management and prevention programs across multiple states.
- Acted as a team subject matter expert for the Medicare Diabetes Prevention Program, Diabetes Self-Management Education accreditation and recognition, financial sustainability for evidence-based health promotion, and community organizing for collective action.

2021-2022 | Senior Improvement Advisor | Comagine Health | Seattle, WA

- Served as the Oregon state lead for Comagine Health's CDC 1705 Cooperative Agreement to Scale the National Diabetes Prevention Program in underserved areas of New Mexico, Oregon, and Utah.
- Managed the ACL Cooperative Agreement to Grow the CINO of Oregon to Deliver and Sustain Evidence Based Chronic Disease Self-Management and Support Programs, including the design and implementation of a complex network infrastructure with supporting committee and subcommittees.
- Established and co-convened the Diabetes Prevention Alignment Workgroup in partnership with the Oregon Health Authority to strategically leverage, align, and coordinate roles and resources across the state to reduce the burden of Type 2 diabetes in Oregon.
- Developed and provided training for team members and external partners to align with project and coalition goals.
- Maintained active partnerships with external partners from community-based organizations, health care systems, health plans, associations, and federal and state public health agencies.

2017-2021 | Improvement Advisor | Comagine Health | Portland, OR

- Served as the Oregon state lead for Comagine Health's CDC Cooperative Agreement to Scale the National Diabetes Prevention Program in underserved areas of New Mexico, Oregon, and Utah. Oversaw program activities and provided technical assistance to five affiliates providing the National DPP, developed and implemented subcontracts, established bi-directional referral systems, supported payment model implementation, and designed and implemented new strategies to identify, engage and retain participants in the National DPP.
- Established and co-facilitated the Metro Regional Healthy Living Coalition in partnership with Multnomah County Aging and People with Disabilities office and the coalition's National DPP subgroup.
- Managed the Centers for Medicare and Medicaid Services' Everyone with Diabetes Counts Initiative in Oregon, including implementing the Diabetes Empowerment Education Program, piloting diabetes education program delivery for Medicare beneficiaries receiving dialysis, and conducting the final reporting of participant information, participant clinical data and narrative reports for contract deliverables.
- Developed and implemented protocols for collecting and securing identifiable clinical data and partnering with analytic staff to develop a semi-automated quarterly feedback report for program survey data.

2015-2017 | Project Coordinator | HealthInsight | Portland, OR

- Coordinated the growth of diabetes self-management education programs to rural and underserved communities by establishing program delivery infrastructure, growing local coalitions, and providing ongoing technical assistance to program delivery organizations.
- Developed innovative referral pathways between healthcare providers and social service organization for self-management education.
- Organized and supported regional collaborations of community-based organizations to increase capacity and provide linkages to health systems and clinics.
- Coordinated the data collection, management, and analysis of identifiable clinical and self-reported data to measure patient engagement in self-management education.

2015 | Administrative Specialist (limited duration) | Oregon Health Authority-Public Health Division | Portland, OR

- Provided administrative and operational support to chronic disease self-management program providers across the state.
- Acted as the liaison between community partners and the state public health department by developing partnerships and conducting collaborative activities with contractors.
- Interpreted rules, policies, and procedures to various partners and contractors to assure effective communication, reimbursement, and timely scheduling and training of volunteers.
- Audited and coordinated data collection activities by working closely with internal and external key partners to track, enter, and assure capture of complete data.

2014-2015 | Contract Research Assistant | Portland State University | Portland, OR

- Worked with the Native American primary investigator to analyze and synthesize qualitative interviews to explore the connections between culture, health and place as described by Urban Native American/Alaska Native community members and civic members.
- Assisted in the development of evaluation protocol and tools for NIH R01 Research Project Grant Proposal for Native American tribal reservation.
- Coordinated the development of a NIH Support for Conferences and Scientific Meetings (R13) proposal for community building among Native American researchers and undergraduate students.

2014-2015 | Contract Research Assistant | Wisdom of the Elders | Portland, OR

- Worked collaboratively with the project team and community partners to create, finalize, and implement a program evaluation and research protocol for Native American youth attending an indigenous science and health camp.
- Gathered information from 40+ indigenous youth, elders and community partners for a detailed process and outcome evaluation to inform future programs.

2013-2014 | Project Coordinator | Photography Channeling Youth to Community (PHOTO) | Portland, OR

- Organized recruitment, outreach, and engagement activities to engage low-income youth and youth of color and provide leadership opportunities for team members.
- Created collaborative opportunities for Portland State University students to gain research skills and work within underserved communities.
- Provided mentoring and training to undergraduate and graduate students related to research and project development.

2014 | Capacity Building Intern | Future Generations Collaborative through Multnomah County Health Department | Portland, OR

- Partnered with stakeholders to develop a training structure and evaluation tools to guide capacity building for elders and natural helpers based on community and collaborative priorities.
- Developed culturally tailored training materials for community members to learn about public health as it relates to American Indian/Alaska Native communities and health priorities.

2011-2012 | Health Promotion Coordinator | “It Starts With Me” Health Promotion Company | Missoula, MT

- Conducted health screenings and health promotion activities in urban and rural regions of Montana working with different populations to explain and provide medical information.

2009-2012 | Tobacco Prevention Coordinator | Carroll College Wellness Center | Helena, MT

- Coordinated cessation, prevention, and policy work for tobacco use on campus.

Professional Membership and Affiliations

- 2025-2026 | Board Member | CIVITAS Networks for Health
- 2022-present | Advisory Council Member | Oregon Wellness Network DSMES
- 2021-2026 | Chair, Emerging Leaders Council | CIVITAS Networks for Health

Awards and Honors

- 2014 | Nominee | Excellence in Student Sustainability Award
- 2010 | Public Health Champion Award | Tobacco Prevention

Invited National and State Presentations

- 2025 | Transforming Health Through Community Collaboration: The Power of Community Care Hubs | Utah Public Health Association
- 2025 | Use Federal Funding for Initiating Partnerships to Advance Data Exchange and Connect Systems of Care | Civitas Networks for Health
- 2025 | Unlocking Health: The Power of Community Care Hubs | Civitas Networks for Health
- 2024 | Medicaid Waivers and State Plan Amendment Opportunities to Fund Evidence-Based Programming | National Council on Aging webinar series Medicaid Opportunities for Evidence-Based Program Sustainability
- 2023 | Strategies to Design Inclusive Accessible Statewide Networks for Health Education | Age+Action 2023

- 2022 | Designing Statewide Approaches to Standardize Support for Evidence-Based Programs Through Multi-Partner Engagement | Age+Action 2022
- 2021 | Developing Sustainable Partnerships with Community-Based Organizations | CPC+ Cross-Regional Learning Event: Developing Community Partnerships for Sustainability in Independent Practices
- 2020 | Bi-Directional Referral Systems for the National DPP in Oregon | CDC 1705 Cooperative Agreement Case Studies Presentation