NPAIHB Weekly Update

July 14, 2026

NORTHWEST PORTLAND AREA
INDIAN HEALTH BOARD
Indian Leadership for Indian Health

Agenda

- Welcome & Introduction: Bridget Canniff
- NPAIHB Announcements, Events, & Resources
- N CREW Research Topic – Grant Writing 101:
  Dr. Victoria Warren-Mears & Hannah Throssell, NWTEC / NWRRC
- Communicable Disease Updates: Dr. Tara Perti, PAIHS
- Questions & Comments

Please sign in, using the chat box, with your full name and tribe or organization

Upcoming Indian Country ECHO Telehealth Opportunities

- **Hepatitis C ECHO** – 1st, 3rd & 4th Wednesday of every month at 11am PT
  - Wednesday, July 15th at 11am PT
  - Didactic Topic: *Hep C Elimination at 12 Clans Unity Hospital*
  - To join via Zoom: https://echo.zoom.us/j/537117924?pwd=OEExbERmK2pSUFFsMzV1SmVpb3g3dz09

- **Month in Virology ECHO** – 3rd Wednesday of every month at 12pm PT
  - Wednesday, July 15th at 12pm PT
  - Didactic Topic: *Month in Virology – Focusing on RSV, Measles & Other Emerging Topics*
  - To join via Zoom: https://echo.zoom.us/j/807187455?pwd=cG1rcGhMVGtnTGdqSDhKMlhGVFI2QT09

- **Infectious Disease ECHO** – 3rd Thursday of every month at 11am PT
  - Thursday, July 16th at 11am PT
  - Didactic Topic: *Test and Treat: HCV, HIV, Syphilis*
  - To join via Zoom: https://echo.zoom.us/j/97240849538?pwd=TzJUMWo5M082K1kxMitOV2diY3BaQT09

- **EMS ECHO** - 1st Tuesday & 3rd Thursday of every month at 5pm PT
  - Thursday, July 17th at 5pm PT
  - Didactic Topic: *Hazmat Exposure and EMS Considerations*
  - To Join via Zoom: https://echo.zoom.us/j/84832881641?pwd=SXllNlpJa0Vta1R1c28xcUh5V1dlUT09

Upcoming Indian Country ECHO Telehealth Opportunities

- **emRIC ECHO** – 3rd Monday of every month at 8:30am PT
  - Monday, July 20th at 8:30am PT
  - Didactic Topic: *Updates in the Prehospital Care of Pediatric and Adult Obstructive Lung Disease*
  - To join via Zoom: https://echo.zoom.us/j/89810907975?pwd=d1gydTAvdFUxSU4wb1d2TlNEUTlEQT09

- **Cardiology ECHO** – 3rd Monday of every month at 11am PT
  - Monday, July 20th at 11am PT
  - Didactic Topic: *Supraventricular Tachycardia*
  - To join via Zoom: https://echo.zoom.us/j/81476475100?pwd=ZnBsK2xmYnFYRW9tUVdxWDROeWtMQT09

- **Community Health Representatives (CHR) ECHO** – 3rd Monday of every month at 12pm
  - Monday, July 20th at 12pm PT
  - Didactic Topic: *Trauma-Informed Care for CHRs*
  - To join via Zoom: https://echo.zoom.us/j/85861655901?pwd=0em1G52lvvVpnihVPOoGwp1hDlPjpo.1

NATIVE FITNESS 20

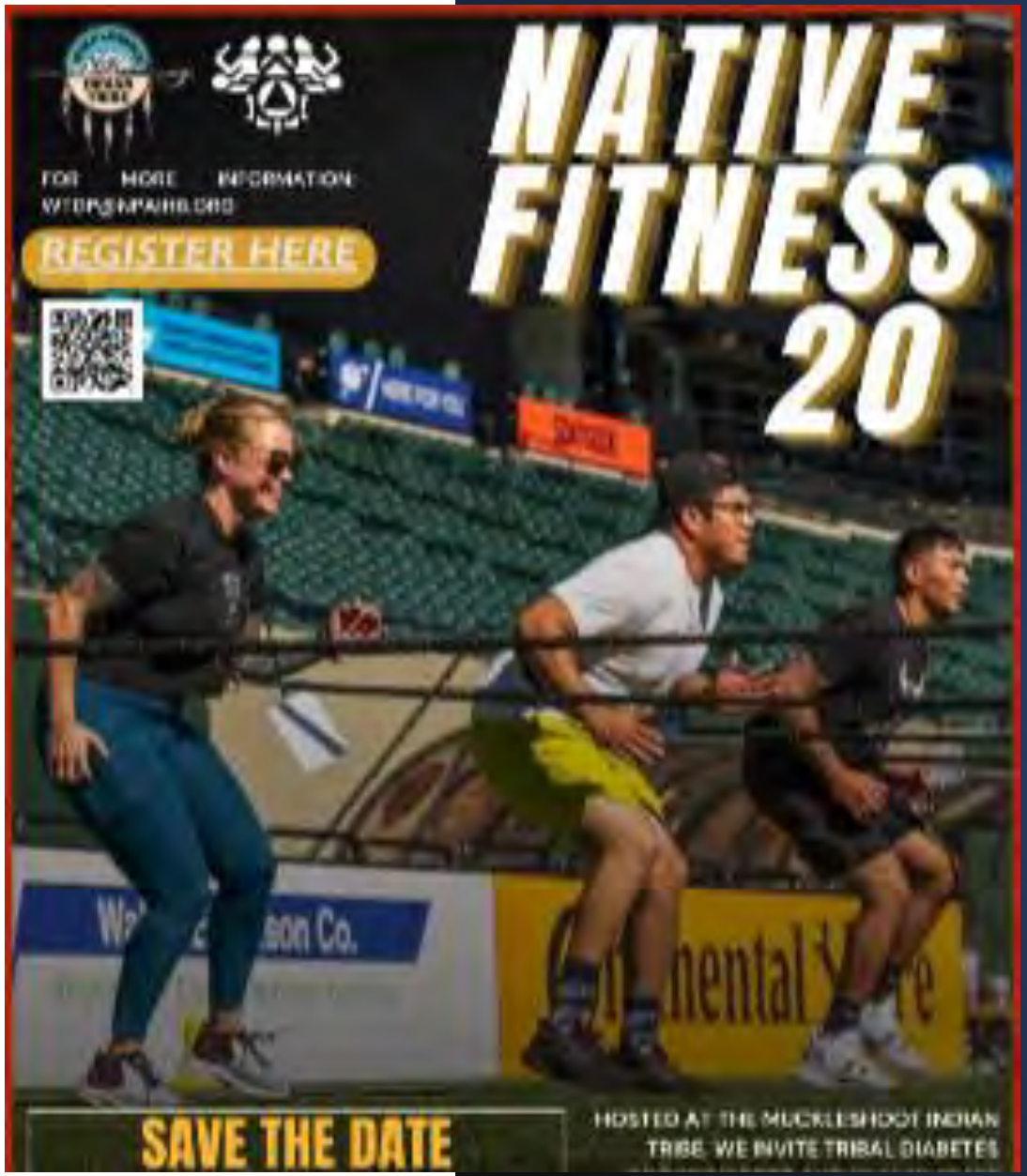
August 4-5, 2026

Muckleshoot Indian Tribe

Auburn, WA

Registration:

www.surveymonkey.com/r/NativeFitness20



Indian Country Ending the Syndemic Training Registration (August 2026)

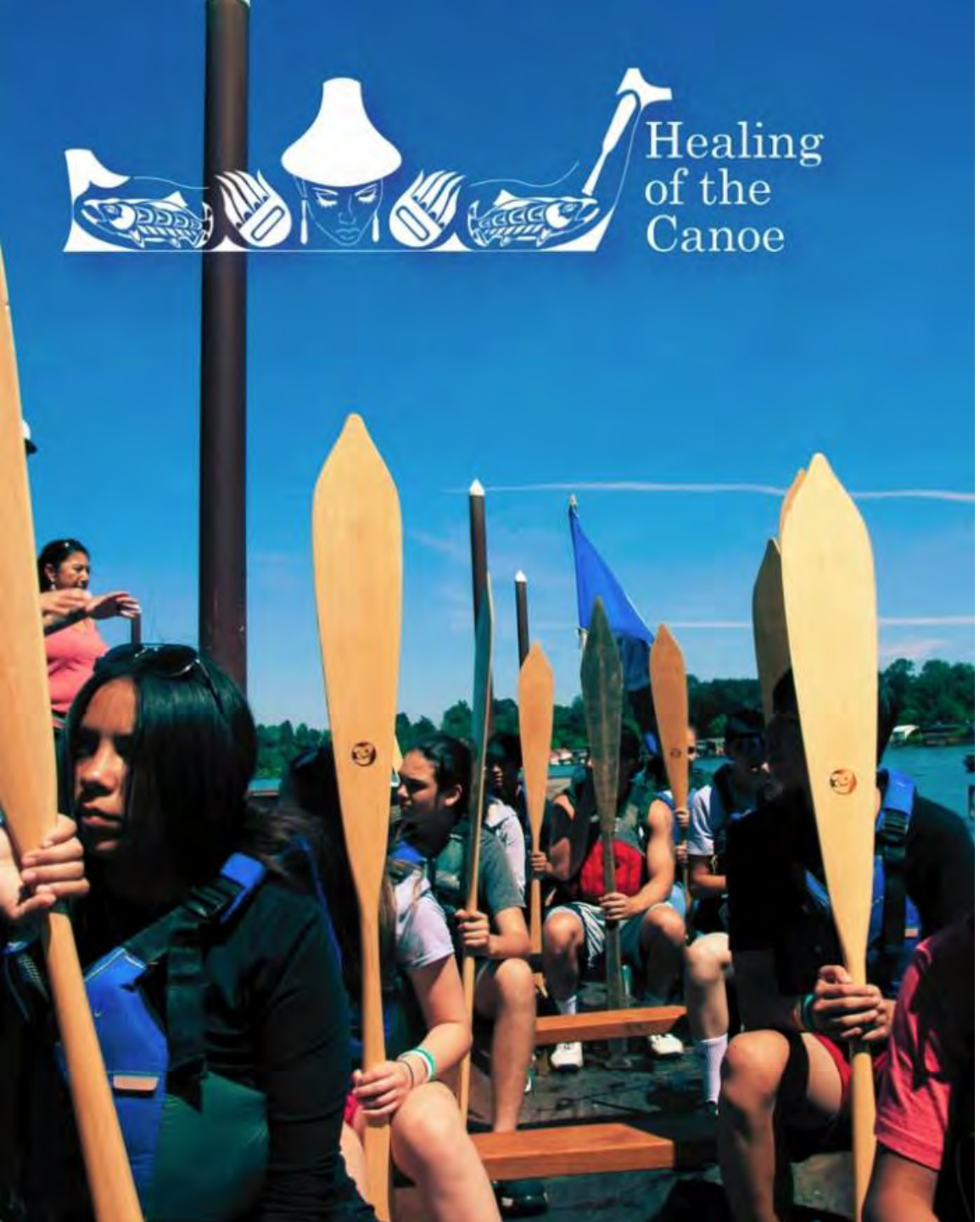
Staff serving Alaska Native & American Indian people are invited to participate in the Ending the Syndemic ECHO program. The program provides comprehensive information to effectively address the evolving HCV, SUD, HIV, and Syphilis syndemic. The program offers a free 2-day in-person training with both a Clinical Track, a Community Health Professionals Track & subsequent telehealth clinics.

Agenda: To view the draft agenda, click here.

The Indigenous Syndemic Pathway for **Clinicians** track will provide an overview and present implementation options, and where requested, assist with implementation. The training is not only informational—technical and other support needed to put policy and practice into place is available and encouraged. Continuing Education will be provided.

The Indigenous Syndemic Pathway for **Community Health Professionals** (CHPs) track is designed to equip CHPs with the knowledge, confidence, and tools to respond to syndemic topics that can be hard to talk about with relatives. These sessions will cover individual diseases and broader topics. Many of these presentations will include group discussion and interaction. This track is focused to provide training for Community Health Representatives, Health Aides, Peer Navigators, Social Workers, and Case Managers.

Dates: August 11th (8am-5pm PT) and August 12th (8am-4:30pm PT)
Where: Fordson Hotel, 900 W Main St, Oklahoma City, OK 73106 (Hosted by the Southern Plains Tribal Health Board) & Virtually via Zoom
How to Join: Click here to register



Canoe Journey in the Pacific Northwest is a hopeful, resilient time for youth, families, and communities.

The Healing of the Canoe is a culturally grounded curriculum for Native youth that builds connections to culture and community.

Learn more about the curriculum that focuses on life skills on the Healthy Native Youth Website.

HEALTHY NATIVE YOUTH
A Project of NPAIHB

healthynativeyouth.npaihb.org

healingofthecanoe.org

NPAIHB Weekly Update Schedule

- July 21: NO UPDATE - NPAIHB QBM
- July 28: TBD
- August 4: State Partner Updates, Communicable Disease Updates
- August 11: TBD

Grant Writing 101

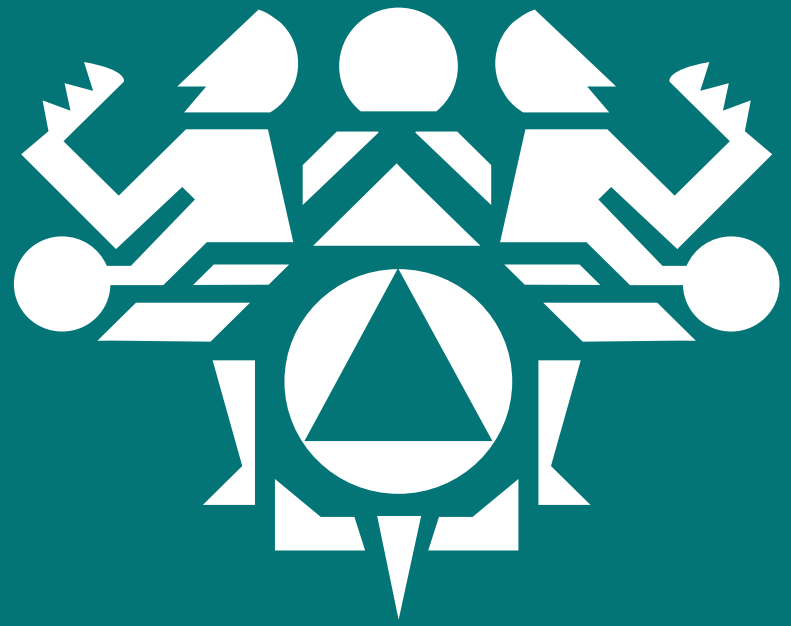
Victoria Warren-Mears, PhD, RDN, FAND
Director, Northwest Tribal Epidemiology Center
N CREW Principal Investigator (PI)

Hannah Throssell, MSW
Senior Research Manager

Agenda

- Grant Basics
- Grant Writing Approach
- Grant Management

Grant Writing Basics



Important Topics We Won't Cover Today

→ What is Grants.gov?

→ Navigating Institutional Review Boards (IRB)

- The Different Types
- How they may vary i.e., Tribal, IHS, Universities, etc.

→ Negotiated Indirect Rates

- These vary across institutions

What Are Grants?

Grants are financial awards designed to achieve specific goals or purposes.

Who Provides Grant Funding?


The current grants environment

Moving Forward

- Once you've found a funding opportunity that matches with your goals and programmatic goals, its time to prepare your grant application.
- Crafting grant proposals can be challenging. There are a lot of moving pieces and usually multiple people who need to be involved.
- Getting organized, creating a plan, and drafting a realistic timeline are essential elements of the process.

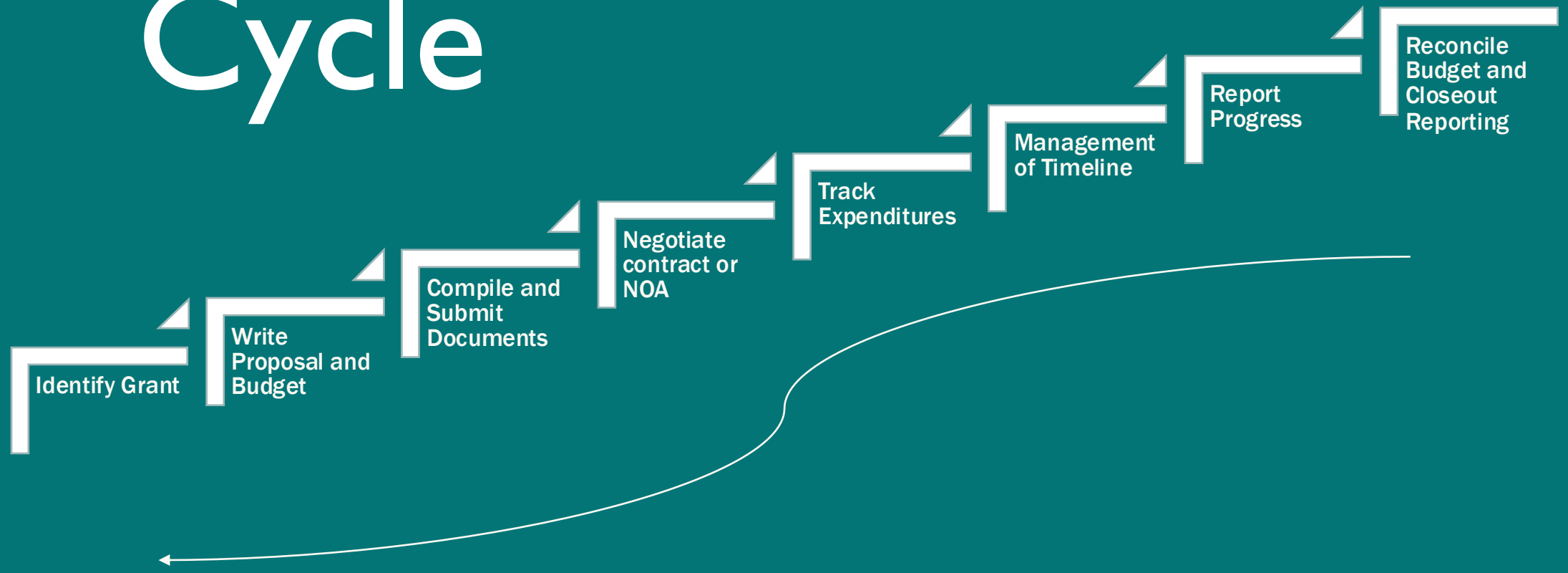
Start as Early as Possible

With the new guidance and 30-day proposed turn around, you may want to write ahead and have grants prepared around needs and strategic initiatives.

Gather your team:

- Subject Matter Experts
- Grant Writer
- Financial Team

Grant Management Cycle



Grant Writing Strategies

Budget Writing and Justification

- Create a spreadsheet to work in
- Salaries
- Fringe benefits
- Supplies (allowed and what isn't allowed)
- Equipment
- Travel
- Indirect cost rate (de minimis vs. negotiated)

Review Criteria

There will be a list in the grant that tells you how the grant will be scored

- Read this part carefully
- Write your grant to make sure you include the points reviewers are looking for

Significance – Is this an important problem or project? How will the research advance science or services?

Investigators – Expertise, training and accomplishments

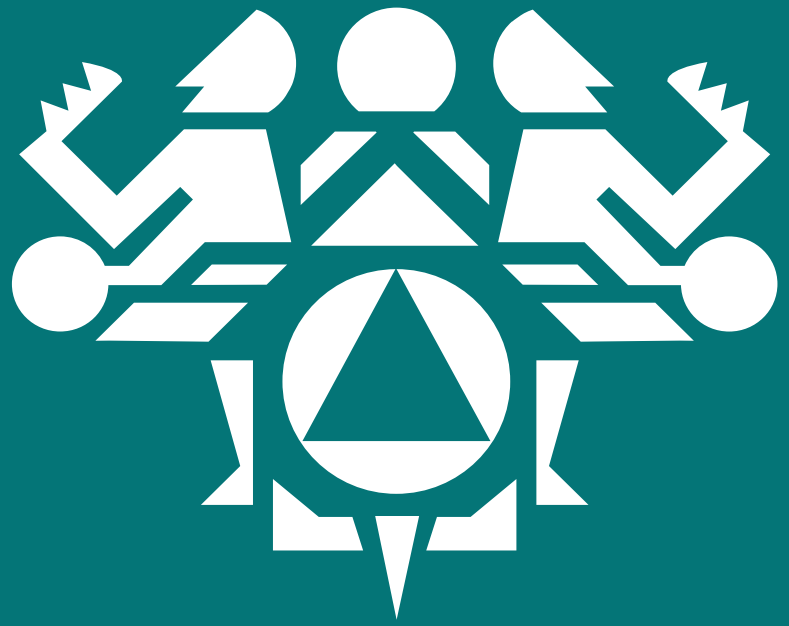
Innovation – Challenges or advances current research or program practice

Approach – Strong strategy, methods, analysis, anticipate problems, and address risk

Abstract

- This will be the last thing to write
- Generally, has to be understood by lay people
- Using common language to describe your proposed project

Questions?



Portland Area IHS

Communicable Diseases Update

TARA PERTI, MD, MPH

MEDICAL EPIDEMIOLOGIST

OFFICE, PORTLAND AREA IHS

July 14, 2026

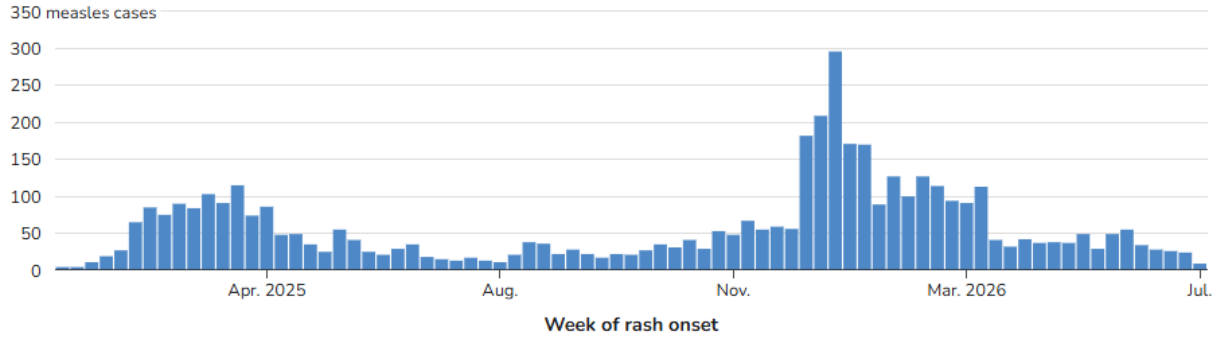
Outline

- Measles
- New World Screwworm
- Cyclosporiasis
- Resources for Heat Preparedness
- In the News: Bundibugyo Virus Disease Updates

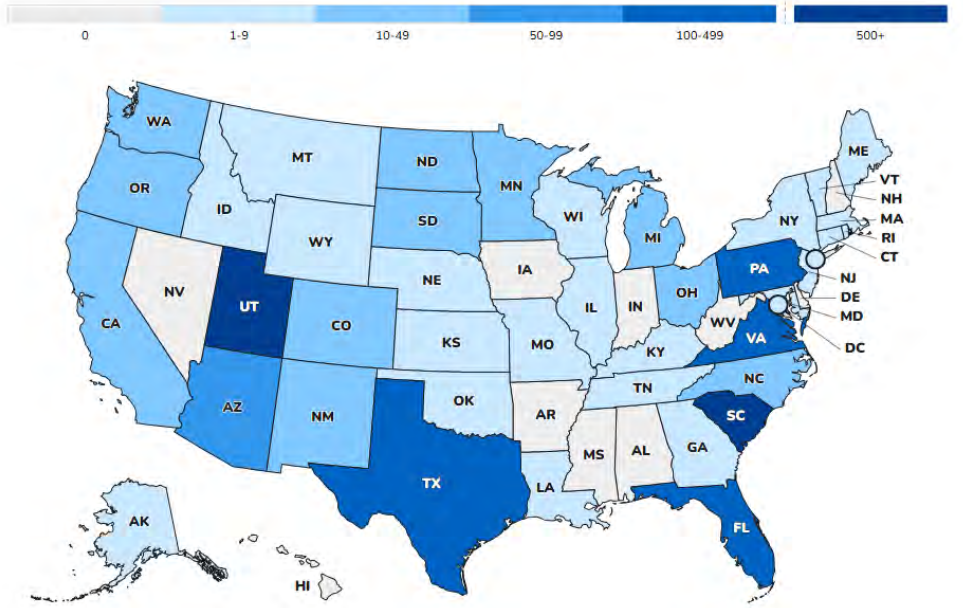
Measles — United States, 2026

- 2,231 confirmed cases among 42 jurisdictions (including NYC, NY state, and D.C.) during 2026 as of 7/9. 97% of 2,289 total cases for 2025.
- 93% of cases are outbreak-associated (≥3 related cases).
- Age: 20% <5 years-old, 50% 5-19 years-old, 29% ≥ 20 years-old.
- 6% hospitalized overall (during 2025, 11% hospitalized, with 18% of those <5 years-old hospitalized).
- 0 deaths (during 2025, 3 deaths among unvaccinated individuals, including 2 healthy school-aged children).
- 93% unvaccinated or with unknown vaccination status, 4% one MMR dose, 4% two MMR doses.

Weekly Measles Cases — United States, 2025-26



Measles Cases Among U.S. Residents, 2026



Measles — Oregon, 2026 (N=27)

- Cases this year have occurred at least in Clackamas, Multnomah, Marion, and Linn Counties with an outbreak involving non-household contacts in Clackamas and Multnomah counties.
- There have now been 27 cases reported this year in Oregon.
- Recent possible public exposure locations in Multnomah and Clackamas Counties:
  - 7/9 (7:42-10:22 AM): Providence Immediate Care—Happy Valley
  - 7/10 (12:18-5:56 AM) and 7/11 (10:04 AM-2:57 PM): Providence Willamette Falls Medical Center Emergency Department in Oregon City
  - 7/11 (1:39-4:57 PM) and 7/12 (7:32-9:46 PM): Providence Portland Medical Center Emergency Department, 4805 NE Glisan St
  - ➢ Anyone at one of these locations should monitor for symptoms through 8/2/26. For more information: https://www.oregon.gov/oha/ERD/Pages/Three-Providence-locations-become-latest-measles-exposure-sites-07.13.2026.aspx
- Latest case with symptom onset during the week of 7/5/26.
- There has been Measles virus detected in wastewater during 6 week period from 5/24/26-7/4/26:
  - Douglas, Deschutes, Washington, Marion, Yamhill, Lane, Coos, Columbia, Umatilla, Linn, Lincoln, Clatsop, Multnomah, Clackamas, Jackson, Josephine, and Polk Counties.
- 96% of cases in Oregon unvaccinated or with unknown vaccination status.

Oregon Health Authority. Measles / Rubeola (vaccine-preventable). Available at: https://www.oregon.gov/oha/ph/diseasesconditions/diseasesaz/pages/measles.aspx
Oregon Health Authority. Oregon Health Authority : Oregon reports measles outbreak; new wastewater dashboard tracks measles virus by county; Respiratory Viral Pathogen Wastewater Monitoring Dashboard. Available at: https://public.tableau.com/app/profile/oregon.public.health.division.acute.and.communicable.disease.pre/viz/OregonsRVPWastewaterMonitoring/Mainpage?publish=yes&utm_medium=email&utm_source=govdelivery;

Measles — Portland Area, 2025-26

Location (State/County)	Number of Cases		Additional Cases (e.g. Among Travelers)
	2025 (N=26)	2026 (N=82)	
Washington	Total: 12	Total: 45	9 additional cases among travelers to Washington (King and Snohomish Counties) in 2025. 2 travelers in 2026 (King).
Snohomish	2	14	
Clark		8	
Kittitas		7	
Walla Walla		7	
Stevens		3	
King	7	3	
Grant		2	
Spokane	1	1	
Whatcom	2		
Oregon	Total: 1	Total: 27	
Idaho	Total: 13	Total: 10	2 additional cases among travelers to Idaho (Bonneville and Cassia Counties) in 2025. 1 case in a traveler in 2026.
Canyon (Southwest District Health		6	
Madison (Eastern Idaho Public Health)		3	
Kootenai (Panhandle Health District)	1	1	
Boundary (Panhandle Health District)	6		
Bonneville (Eastern Idaho Public Health)	5		
Bonner (Panhandle Health District)	1		

Washington State Department of Health. Measles Cases in Washington State. Available at: https://doh.wa.gov/you-and-your-family/illness-and-disease-z/measles/measles-cases-washington-state
Idaho Department of Health and Welfare. Tracking Measles in Idaho. Available at: https://public.tableau.com/app/profile/idaho.division.of.public.health/viz/TrackingIdahoMeasles/StatewideSummary?publish=yes
Oregon Health Authority. Measles / Rubeola (vaccine-preventable). Available at: https://www.oregon.gov/oha/ph/diseasesconditions/diseasesaz/pages/measles.aspx

Summary: Measles

- 2,231 confirmed cases among 42 jurisdictions during 2026 as of 7/9, 97% of cases during 2025. 93% of cases unvaccinated or with unknown vaccination status.
- Portland Area: Washington: 45 cases (stable); Oregon: 27 cases (increasing), Idaho: 10 cases (stable).
- ≥ 95% vaccine coverage is needed to prevent measles outbreaks in communities.
- In 2024-25, MMR coverage among kindergartners continued to decline. Washington: 90.9% (90.6% for 2025-26) , Oregon: 90.5% (89.6% for 2025-26), and Idaho: 78.5%. Idaho and Oregon have the highest and 2nd highest exemption rates in the country.

Recommendations

- Ensure your patients, families, and community are up to date on their measles immunizations (goal ≥95% up to date).
- Ensure all health care workers have presumptive evidence of measles immunity and that Respirator Fit Testing has been done in the past year.
- Consider measles in anyone with a fever and generalized maculopapular rash with recent international travel or travel to an area with a measles outbreak, exposure to a measles case, or who meets clinical criteria and is unvaccinated. Recommend testing performed in collaboration with local health jurisdiction.
- Train staff (e.g. Project Firstline: Measles Infection Control Microlearn with discussion guide), including front-desk to recognize possible measles, immediately mask and bring back to a designated room (e.g. airborne infection isolation room if available).
- If a measles case is identified in your community, recommend signage and a protocol to screen patients for possible measles (e.g. fever and rash, with international travel, travel to a community with a measles outbreak, or known exposure to measles in the past 21 days).
- Immediately report suspected cases to local or Tribal public health and recommend testing performed in collaboration (nasopharyngeal or throat swab for measles PCR, urine for PCR particularly if ≥ 72 hrs after rash onset, sent to state PHL if possible; blood for measles IgM and IgG sent to a commercial laboratory).
- Advise patients with suspected measles to isolate at home, away from others through 4 days after rash onset (for severely immunocompromised persons, the infectious period is through the illness duration) or measles has been ruled out.

Patient Education Resources for Respiratory Viruses/Immunizations

IHS Division of Epidemiology and Disease Prevention Educational Resources;

National IHS Public Health Council Public Health Messaging

Northwest Portland Area Indian Health Board (NPAIHB): VacciNative; Native Boost

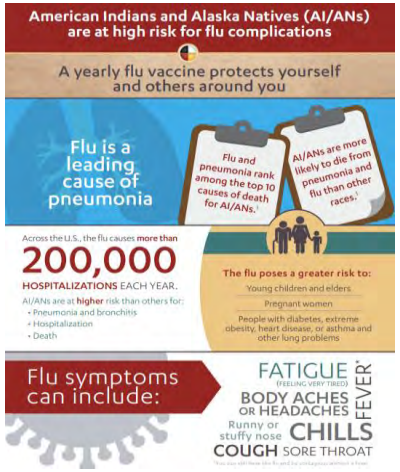
National Council of Urban Indian Health

Johns Hopkins Center for Indigenous Health. Knowledge Center: Resource Library

Indian Country ECHO/UNM Project ECHO: Making a Strong Vaccine Recommendation: Vaccine Communication, MMR Vaccine Outreach Strategies, Current Measles Response and Clinical and Prevention Best Practices

American Academy of Pediatrics:
Recommended Child and Adolescent Immunization Schedule, https://www.aap.org/immunization; https://www.healthychildren.org/immunizations (e.g. COVID-19 What Families Need to Know)

American College of Obstetricians and Gynecologists. Maternal Immunization Schedule



American College of Obstetricians and Gynecologists. Maternal Immunization Schedule

Children's Hospital of Philadelphia: Vaccine Education Center; Vaccine and Vaccine Safety-Related Q&A Sheets (e.g. Q&A COVID-19 Vaccines What You Should Know; Protecting Babies from RSV: What You should Know; RSV & Adults: What You Should Know; Influenza: What You Should Know); Vaccines and Infectious Diseases in the News

Immunize.org: Clinical Resources A-Z; Influenza (Flu)

Boost Oregon: Videos and Resources

Personal Testimonies: Families Fighting Flu: Our Stories

Washington State Department of Health: Immunizations and Vaccines | Washington State Department of Health; Flu Overview; Materials and Resources; Influenza (Flu) Information for Public Health and Healthcare; Measles Communications Toolkit for Washington State Partners; Measles | Washington State Department of Health; COVID-19; DOH COVID-19 Vaccine Schedule; Washington State Statewide Standing Order for COVID-19 Vaccine FAQs for the Public; West Coast Health Alliance announces vaccine recommendations for COVID-19, flu, and RSV | Washington State Department of Health; Respiratory Illness Data Dashboard.

Oregon Health Authority: Immunization Resources; Flu Prevention; Measles / Rubeola (vaccine-preventable) : Diseases A to Z : State of Oregon; Oregon's Respiratory Virus Data.

Idaho Department of Health & Welfare: Child and Adolescent Immunization and Adult Immunization; Flu (Seasonal and Pandemic); COVID-19; Measles | Idaho Department of Health and Welfare; Idaho Weekly Statewide Viral Respiratory Disease Indicators.

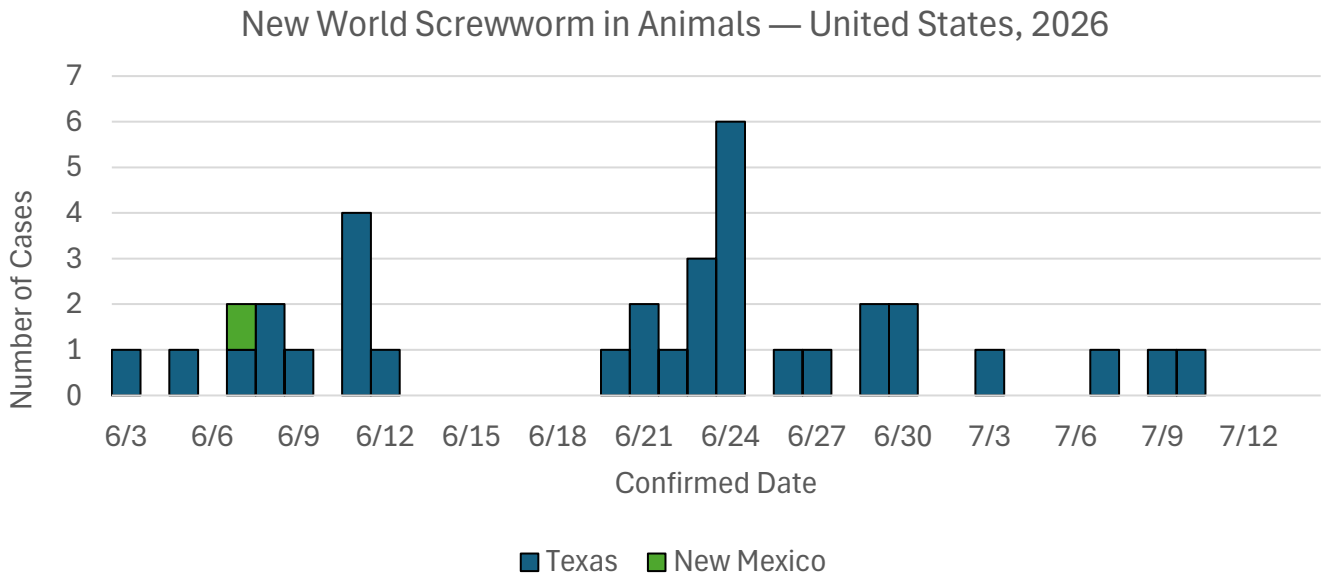
Centers for Disease Control and Prevention: Preventing Seasonal Flu; Flu Resources; Preventing Spread of Respiratory Viruses When You're Sick; RSV; About Measles | Measles (Rubeola) | CDC; Measles Resources | Measles (Rubeola) | CDC; Measles Videos | Measles (Rubeola) | CDC

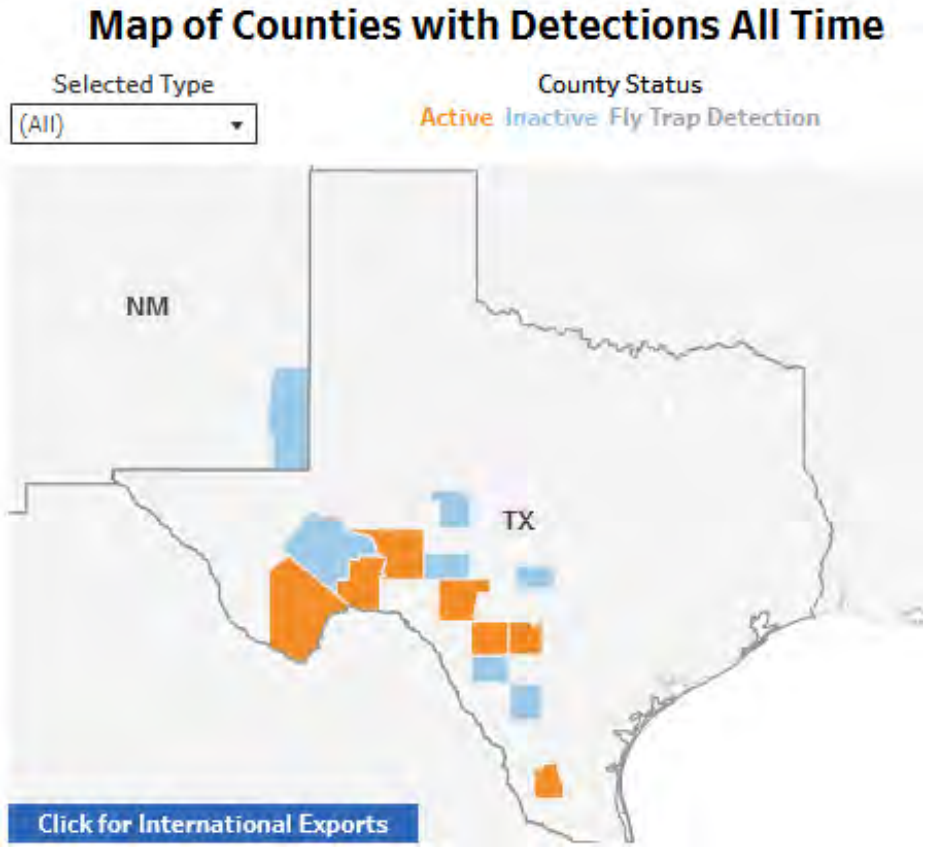
Examples of Patient Education Resources from the Northwest Portland Area Indian Health Board (NPAIHB)

https://www.indiancountryecho.org/vaccinative/
https://www.indiancountryecho.org/native-boost/

New World Screwworm

- 6/3/26: First case confirmed in U.S., calf identified in Zavala County, Texas.
- Animal cases to date in US (through 7/13/26: 35 (33 in Texas, 1 in New Mexico); Cattle (19), Sheep (10), Goats (4), Dogs (2).
- No human cases identified in the U.S. to date.



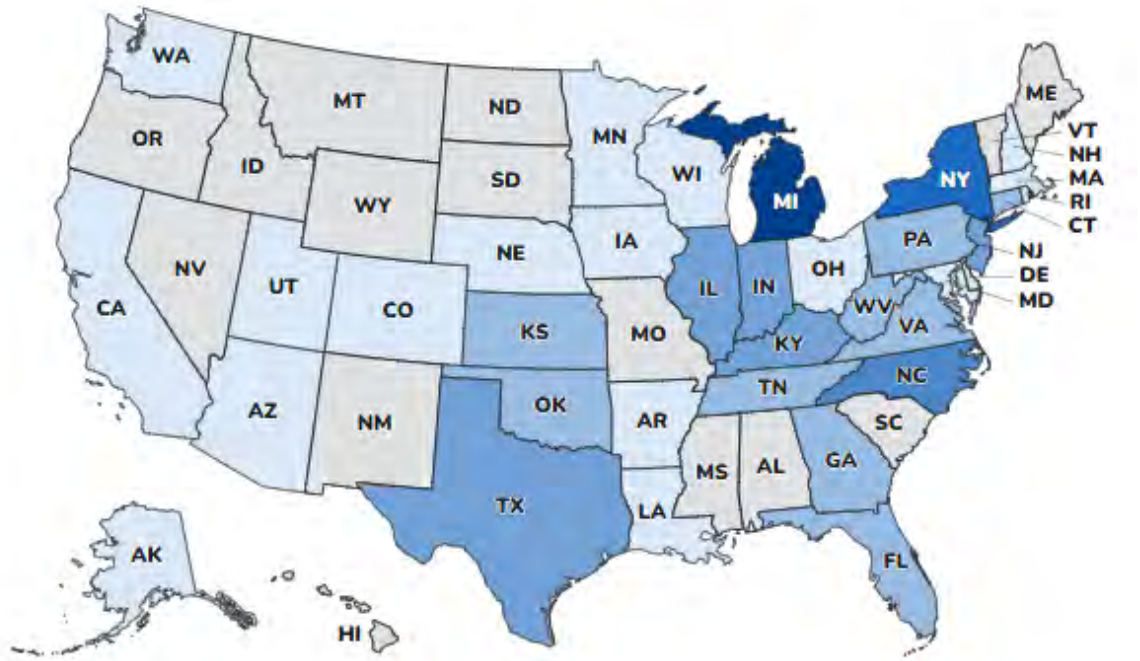


[Confirmed Detections of New World Screwworm | Animal and Plant Health Inspection Service]

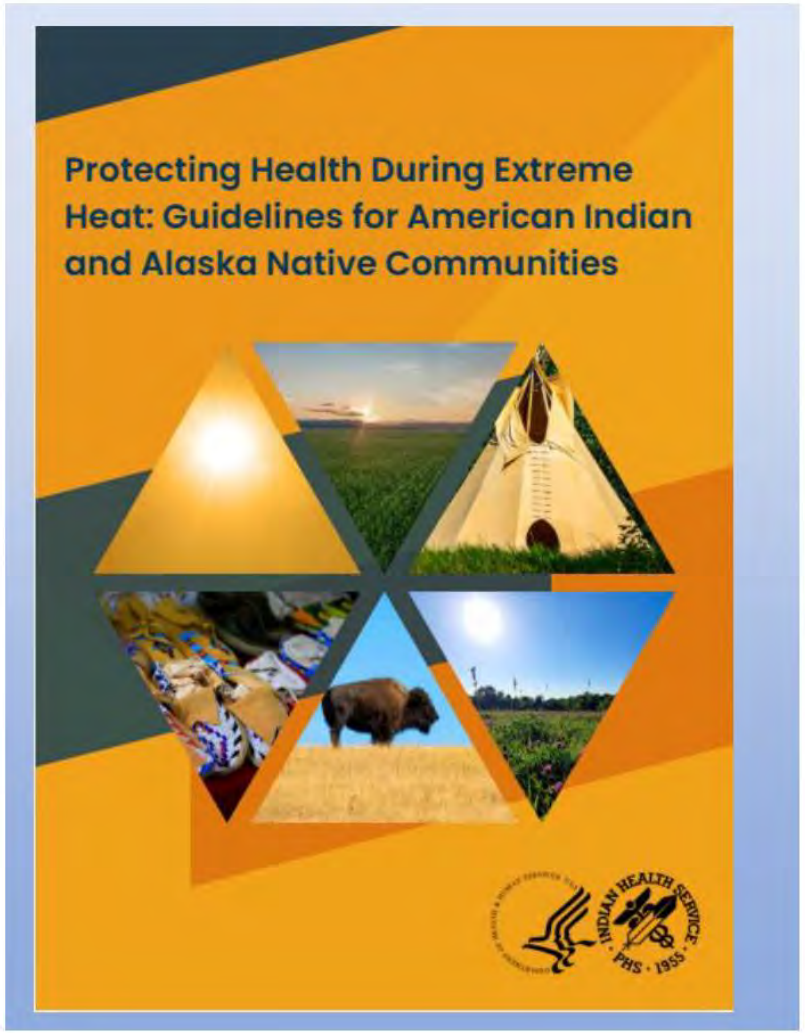
USDA. https://www.aphis.usda.gov/news/agency-announcements/usda-confirms-first-case-new-world-screwworm-dog-lea-county-new-mexico

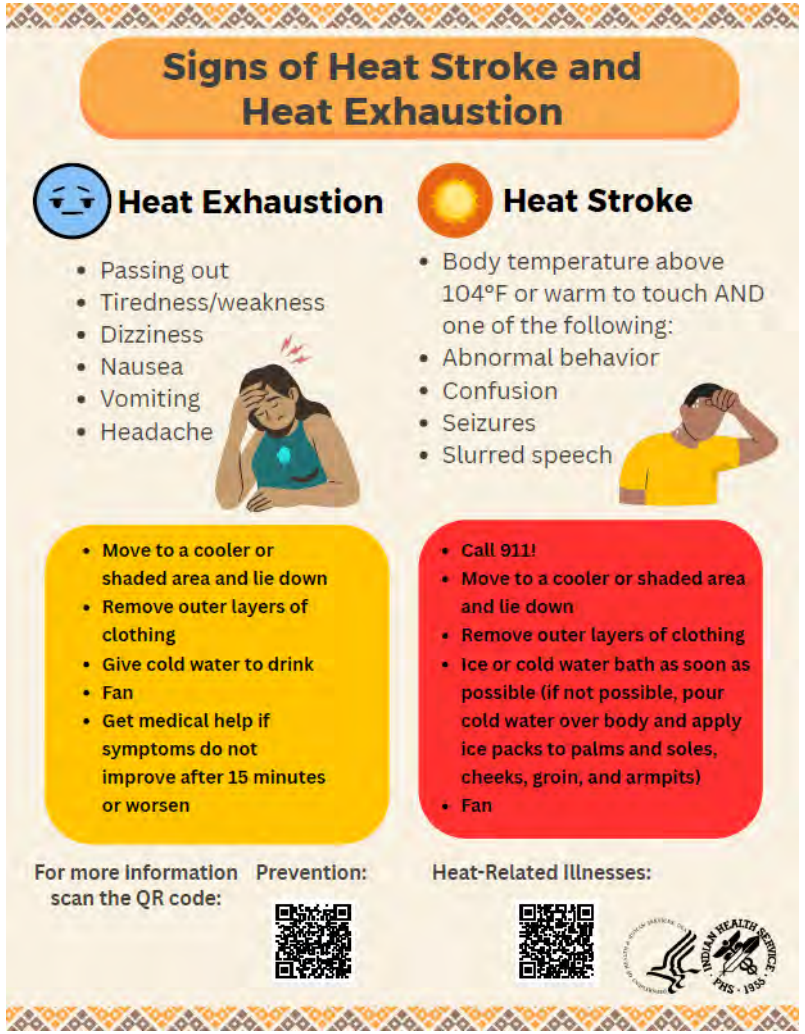
Screwworm.gov | Unified Government Response To Protect the United States

Domestically-Acquired Cyclosporiasis Cases — United States (May 1- July 13, 2026)



Resources for Heat Preparedness





Flyer on Signs of Heat Stroke and Heat Exhaustion

National IHS Public Health Council – Other Materials:

Heat Preparedness Flyer

National Heat Awareness Month Flyer (July)

National Heat Awareness FB Post (July)

Additional Resources:

Heat Exhaustion vs. Heat Stroke Infographic

National Weather Service: Heat Safety for You and Your Family

OSHA: Prevent Heat Illness at Work

California Area IHS: Extreme Heat Toolkit for Tribes

Extreme Heat | Washington State Department of Health

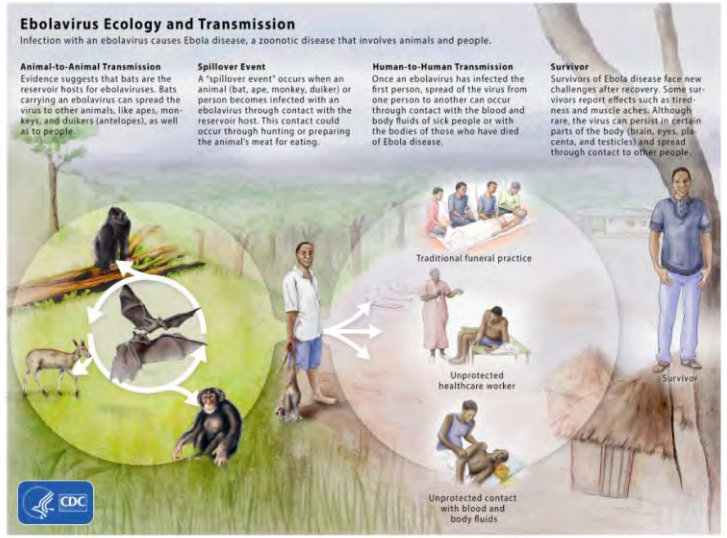
Oregon Health Authority : Extreme Heat : Get Prepared : State of Oregon

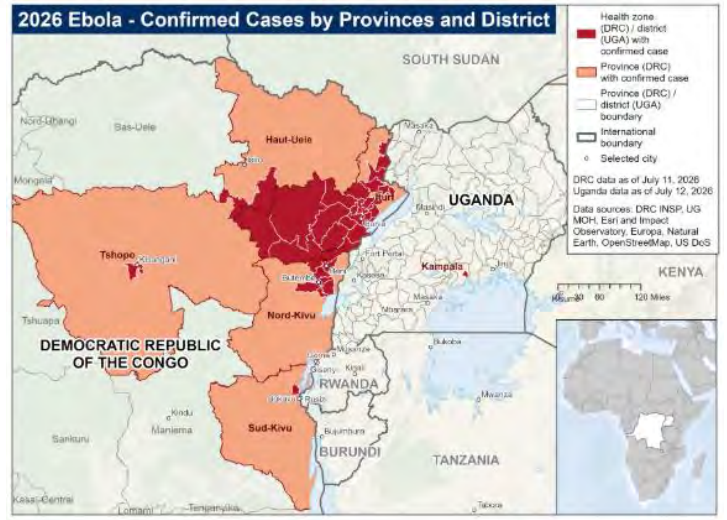
Warmer, drier conditions raise risk of summer health hazards | Idaho Department of Health and Welfare

In the News

Bundibugyo Virus Disease (BVD)

- Ongoing outbreak of Bundibugyo virus, a species of orthoebolaviruses which cause Ebola disease, in the Democratic Republic of the Congo (DRC) and Uganda.
  - As of 7/11, the DRC has reported 1926 confirmed cases and 702 confirmed deaths (36% case fatality).
  - As of 7/12, Uganda has reported 20 confirmed cases, 1 probable case, 2 confirmed deaths and 1 probable death (14% case fatality).
  - On 6/24, France reported a case of Ebola in a physician who had worked in the DRC with the Alliance for International Medical Action; this person has now recovered and been discharged.
  - One American is currently being treated for Ebola in Germany. This individual worked in the DRC with Samaritan's Purse in logistics.
  - One American was previously flown from the DRC to Germany where they were treated and released. High-risk contacts were being monitored during the 21 day incubation period in Germany and the Czech Republic and have been released.
- Impact on Portland Area IHS: USPHS has been deploying officers to Kenya with plan to monitor Americans exposed to Ebola and to provide treatment as needed. 5/28: Court injunction stopping construction of facility in Kenya; next hearing July 23.
  - https://www.nytimes.com/2026/05/26/us/politics/trump-ebola-kenya.html; https://www.nytimes.com/2026/06/02/world/africa/kenya-ebola-us-quarantine-unit-court.html.
- Incubation period: 2-21 days.
- Those returning from Ebola-affected areas should monitor for symptoms for 21 days after leaving the outbreak area. Infected persons cannot transmit ebolaviruses before they are symptomatic.
- Symptoms: Fever, severe fatigue, weakness, headache, myalgias/arthralgias, sore throat followed by decreased appetite, nausea/vomiting, diarrhea, abdominal pain, unexplained bleeding.





CDC. Ebola Disease: Current Situation. Available at: https://www.cdc.gov/ebola/situation-summary/index.html


INDIAN HEALTH SERVICE
PHS · 1955 ·

Questions
&
Comments