

Mano En Mano



NMCHWA

15TH ANNUAL CONFERENCE/SYMPOSIUM

“ CHWS/CHRS Showcase Their Work Through Wellness”



Event will be held:

December 9 & 10, 2010

Location: TBD

Albuquerque, New Mexico

NMCHWA MISSION

To nurture the community health worker/promotora model to collectively improve access and quality of health care for New Mexicans by advocating for and empowering its members through training and education.

Conference Objectives:

- To highlight the relevant work and impact that CHWs/CHRs have on our communities.
- To provide training for participants that is relevant to their jobs and improve the health of communities.
- To increase opportunities to strengthen and build partnerships with peers in improving health outcomes in our communities.
- To recognize CHW/CHR programs and individuals who have taken a leadership role in promoting the Model in our local communities, state and national levels.

Day One

8:00 –8:30	Registration/networking/food
9:00	Welcome by NMCHWA Network
9:15—9:45	Opening Session: Key Note Speaker: W. Azul La Luz, PhD
9:45 —10:00	Break
10:00—11:00	Plenary Session 1
11:00—12:00	Plenary Session 2
12:00—1:00	Luncheon & Fashion Show
1:00-2:00	Plenary Session 3
2:00—3:00	Plenary Session 4
3:00—3:30	Exercise Break
3:30—5:30	Plenary Session 5

Join NMCHWA and its partners in the advancement of the CHW Model!



Natalie Hernandez & Mary Cardona with UNM Hospital Maternity & Family Planning Promotora Program shown receiving an award for **Model Program of the Year** in 2008



Sonya Montoya, Marian Nez, Natalie Hernandez, Mary Cardona, Norma Huerta show their Graduation Certificates after completing the Reaching Out Training in 2007

NMCHWA VISION STATEMENT

"The New Mexico Community Health Worker Association supports community health workers to improve the health and well-being of New Mexico communities."

Day two Agenda

8:00—8:30	Continental Breakfast
8:30—9:30	Keynote Speaker:
9:30—10:30	Plenary Session 7
10:30-10:45	☺ Break
10:45-11:45	Plenary Session 8
11:45 to 12:45	CHWs & CHRs Showcase Their Work
12:45—3:00	Graduation & Awards Luncheon
	Silent Auction Finale



Network Officer Nominations

President_____

Vice President_____

Secretary_____

Treasurer_____

Nominate your leaders! Elected officers will also serve on the NMCHWA Board of Directors.

Meetings held monthly through teleconferencing.

AWARDS

Please submit nomination no later than **November 1, 2010** for the following:

- 1) CHW Advocate Lifetime Achievement—Advocacy on behalf of the CHW model
- 2) CHW/CHR/Promotora Lifetime Achievement (working as a promotora/CHW/CHR for 10 years or more)
- 3) CHW/CHR/Promotora of the year award
- 4) Model Program of the Year

Send it attention: [Lucille Archuleta lchacon@lcdn.org](mailto:Lucille.Archuleta.lchacon@lcdn.org)

EXHIBITS

Take down your exhibits by 3 p.m. **December 10, 2010**; Please ☒ the exhibit line in the registration form.

GRADUATION

Reaching Out Training Manual Curriculum graduates. Submit the names of those in your program who have completed the curriculum during the past year. Send names and supporting proof such as sign-in sheets and copies of certificates for each training session/topic by email to nmchwa@yahoo.com or fax to (505) 873-5317

Mail to NMCHWA P.O Box 81433, Albuquerque, NM 87198 no later than November 1, 2010. Graduates will be honored with a certificate of completion from UNM/HSC at the Awards Luncheon. DOH Secretary, Alfredo Vigil, M.D. has been invited to address the participants.

REGISTRATION

NAME: _____

ORGANIZATION: _____

TITLE: _____ EMAIL: _____

Address: _____ City _____ State: _____ Zip: _____

_____ NMCHWA MEMBER CONFERENCE FEES \$150 (Early Bird —\$100 if paid by 11/13)

_____ Non-Member Registration Conference Fees \$200 (Early Bird—\$150 if paid by 11/13)

Non-Member Table Exhibit__ \$25 Member Table Exhibit ___Free

_____ Scholarship Request (fill out the Scholarship Request Form) Page 5

Sorry, no honorariums for presenters

SIGN UP NOW FOR NMCHWA MEMBERSHIP!

☐ NMCHWA ANNUAL MEMBERSHIP— SINGLE \$20.0

☐ NMCHWA ANNUAL MEMBERSHIP—CORPORATE \$100.

☐ CONFERENCE REGISTRATION (Member) _____

☐ CONFERENCE REGISTRATION (Non-Member) _____

☐ Exhibit (member free—Non-member \$25) _____

Total: _____

**REGISTER
NOW!**



Method of Payment

☐ Check

☐ Bill Me

☐ Purchase Order

☒ Scholarship

☐ Include my name in the New Mexico CHW Registry

Special Offer

*SCHOLARSHIPS AVAILABLE ON A FIRST COME FIRST SERVED BASIS.
MEMBERSHIP MUST BE PAID TO QUALIFY. Sign up now!*

NMCHWA

P.O. Box 81433

Albuquerque, New Mexico 87198

Phone: 505-255-1227

Fax: 505-873-5317

E-mail: nmchwa@yahoo.com

Places to stay:

Plaza Inn —900 Medical Arts Ave. N.E. (505) 243-5693

La Quinta Inn Airport—2116 Yale Blvd. N.E. (505) 243-5500

Fairfield Inn—1760 Menaul N.E. (505) 889-4000

MCM Elegante—2020 Menaul N.E. (505) 884-2511

Embassy Suites—1000 Woodward Place N.E. (505) 245-7100

Hilton H. Hotel —1901 University N.E. (505) 884-2500

Scholarship Application Form

NMCHWA is happy to announce that a limited number of scholarships are available to assist members with financial need who are without agency support for training and education. The scholarship includes: education sessions; Awards and graduation luncheon, and other meals and snacks during the conference. A maximum amount of \$75 per diem for travel will be granted on a first come first served basis. No hotel room reimbursements will be available this year due to lack of funding. Only apply for what you need so that we can assist promotoras/es,/CHRs/CHWs who are in need of help.

Scholarship applications must be received no later than October 5, 2010 to be considered.

Fax them as soon as possible to (505) 873-5317. If you receive a scholarship and are unable to attend, please let us know immediately so that we can give someone else the scholarship. Thank you

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Please complete the information below:

Name:_____

Organization:_____

Address:_____

Phone: Email_____

I need & deserve a scholarship because :__I_____

I will use the information/skills/contacts I gain at the conference in the following manner:

Approximate number of Patients I see annually:_____

I need: (Please check all that apply)

- ☐ Conference Registration scholarship
- ☐ Per Diem (\$75 maximum) no room and board available
- ☐ I am a current paid member of NMCHWA
- ☐ I am enclosing annual dues for NMCHWA Membership

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I understand that I am expected to attend the full conference, and to use the information and skills gained at the conference in my efforts to improve the health of the community in which I serve.

If I don't attend the full conference I may be charged for registration and will not get the per diem.

I certify that all the statements above are true and correct.

Applicant Signature:_____Date:_____

Supervisor Signature:_____Date:_____

Return completed scholarship form no later than **November 10, 2010** to NMCHWA; P.O. Box 81433, Albuquerque, NM 87198 or fax to (505) 873-5317. Questions? contact nmchwa@yahoo.com (505) 255-1227



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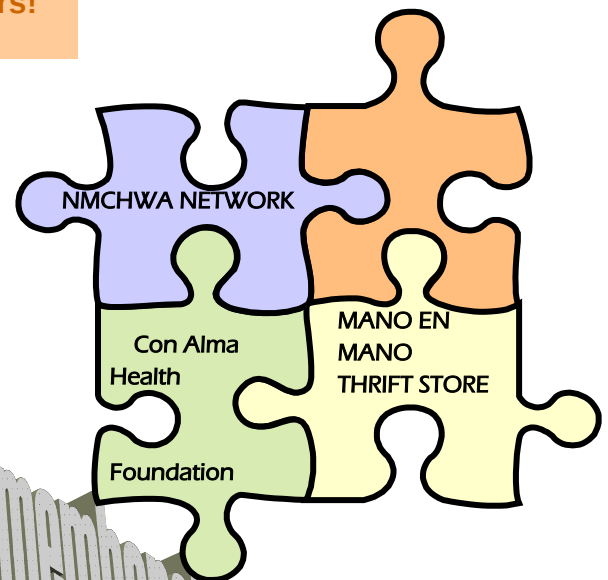


Nominate your leaders
for the NMCHWA Net-
work.

NMCHWA

An organization by and for community health workers!

SPONSORED BY



Register now!
Scholarships available for members

WE'RE ON THE WEB!
WWW.NMCHWA.COM