

Growing State Leadership for Tomorrow's Health Centers



As partners of the National Association of Community Health Centers (NACHC), Primary Care Associations (PCAs) and Health Center Controlled Networks (HCCNs) represent and support health center needs at the state and regional levels. PCAs provide training and technical assistance to help expand health care access and to develop workforce recruitment and retention strategies for health centers. HCCNs assist groups of health centers in solving their operational and clinical challenges associated with the use of health information technology.

Here, we meet five professionals who serve at a PCA or HCCN in different roles and who are making a positive difference by helping community health centers grow and innovate.



Maya Saunders
Coordinator,
Government
Affairs and
Public Policy

Maya Saunders went to school for nursing, but her introduction to public health and community health centers was through an internship in high school with the Center for Community Health Education Research and Service. She was placed with the **Massachusetts League of Community Health Centers** one summer, kept returning on her college breaks, and then was hired full time after graduation.

“Being here has merged what I ultimately want to do and a love for what I currently do now,” she says.

Saunders says to engage young people in the public health sector, you must provide them with the tools they require and demonstrate for them the potential path to leadership.

“It’s important for people my age to know that you can be a CEO or a CMO,” she says. “You can rise to some kind of leadership position, but the only way that is going to happen is if those currently in those positions make a game plan to mentor people like me.”

In the future, Saunders would like to see more specialized health centers, such as those for people who are homeless or who identify as LGBTQ, allowing people who feel like they might be in a subgroup to know that health services and the care they need is available and accessible. She also would like to see more diversity of health center leadership.



Nataly Diaz
Associate
Director of
Workforce
Development

Nataly Diaz

started with an internship program, Health Careers Connection, that exposes college students to public health and health careers. That program connected her to the **California Primary Care Association** (CPCA).

“If I had not gone through that internship program and was not connected to CPCA, I would have never really known about the health center network in the community,” Diaz says. “That exposure was critical to me. Upon finishing my undergraduate education, I went back to CPCA because I was so dedicated to the mission of increasing access to quality health care for some of

our most vulnerable populations.” Having grown up in a rural community that is underserved and without many resources, she wanted to know that her work was supporting those vulnerable communities.

Diaz says that exposure is essential to bringing in more young people.

“It’s critical for community health centers to grow their own workforce by offering training and leadership development opportunities so that people have the opportunity to be exposed,” she says. “But to also, in a way, fall in love with the community health center network and the passion and the commitment to service that many of us who are in the space already bring.”

As a new board member of the Association of Clinicians for the Underserved, Diaz says she is looking forward to expanding her scope of work and her perspective beyond California. She would like to see the Health Center Movement continue to grow and develop leaders “as a way to increase access to quality health care and to create a robust workforce that is not only responsive to, but also reflective of, our diverse communities.”

CONTINUED NEXT PAGE



Heidi Robertson-Cooper
Senior Vice President of Healthcare Transformation

Heidi Robertson-Cooper, at the **Missouri Primary Care Association (MPCA)**, says she is very driven by helping others, especially those who are less fortunate. She grew up in a household where there were not many resources, and she has always wanted to give back.

Although health care was not necessarily in her sights, once she learned about community health centers and their mission, she started working for a health center in northeast Missouri.

Today, Robertson-Cooper says she supports a great team at the MPCA that manages numerous programs, including administering several programs around community health workers, providing the coaching for health homes, optimizing and making the data warehouse actionable, and public policy and advocacy at the state level. Purpose and passion are driving factors for Robertson-Cooper.

“In the Health Center Movement, there’s just so much history to it, and there’s so much being done to impact social factors that go beyond health care,” she says.

To attract younger professionals, Robertson-Cooper suggests appealing to their sense of purpose and commitment to improving our society.

“In Missouri we are really placing an emphasis on community health workers and assessing for social determinants of health, and also removing barriers so patients can focus more on their health,” she says. With greater structure, transparency, and visibility, Robertson-Cooper expects more resources will be put into health centers in the future.



Emily Oake
Special Populations Lead Coordinator

Emily Oake’s introduction to community health centers came through an internship she had with the **Arizona Alliance for Community Health Centers** in Phoenix, AZ, while earning her Master’s in Health Sector Management. After graduating, she went back to the Alliance, first working on voter registration in the health centers and eventually transitioning to her current role involving federally-designated special populations.

Oake says there are a lot of mission-driven people, but

increasing awareness of the Health Center Movement is important. She was not familiar with health centers or the nonprofit world prior to her internship, she says.

“If I had someone who shared that information with me before, I think there would have been a high level of interest,” she says.

As for the future, Oake says community health centers will continue to be essential. “Looking at the model of care health centers are providing, with everything in this one-stop shop type of [setting], being able to coordinate all this care, they are not going away any time soon,” she says. However, she believes that in a changing health care environment they do need to think about how they will look in the future, particularly smaller health centers.



Jessie Janota
Vice President of EHR Operations and Customer Success

While she has a Master’s degree in Forestry and Natural Resources, Jessie Janota entered the health care world after accepting a position with a software systems company that works with health care

organizations to improve patient care delivery. Since 2010 she has worked for the **Oregon Community Health Information Network** (OCHIN) where she oversees EHR product lines offered by OCHIN.

“I really love working for a nonprofit and being very mission-oriented in my work, and being part of an organization that thrives on that as well.” She believes the younger

generation is looking to have work that they find meaningful, and that the public health space provides that fulfillment. To help get the word out, she suggests recruiting in colleges to increase awareness about the available opportunities. OCHIN offers an apprenticeship program to bring in young talent with commitment and potential, recruiting at local universities as well as through word-of-mouth and referrals.

“We built a strong program to bring in new recruits to train them on technical and customer service skills and then provide pathways for growth and long-term placement after successfully completing all segments of the training,” she says. She sees a bright future for community health centers, with more expansion, innovation, integrated care, and more integration with technology. ♦

WELCOME NEW MEMBERS

ORGANIZATION/COMPANY	CITY	STATE
ORGANIZATIONAL MEMBERS		
Eastport Health Care	Eastport	ME
Open Cities Health Center, Inc.	Saint Paul	MN
Wesley Community Center, Inc.	Phoenix	AZ
Denver Indian Health and Family Services	Denver	CO
Kodiak Community Health Center	Kodiak	AK
Claiborne County Family Health Center, Inc.	Port Gibson	MS
Clinica de Salud del Valle de Salinas	Salinas	CA
All Care Community Health Center	Council Bluffs	IA
North Hudson Community Action Corporation	Union City	NJ
NETWORK MEMBERS		
Breakwater Health Network	Duluth	MN
ASSOCIATE MEMBERS		
National Center for Equitable Care for Elders/HSDM	Boston	MA
Metro Health, Inc.	Washington, DC	
Lehigh Valley Health Network	Allentown	PA
CORPORATE MEMBERS		
Cardinal Health, Inc.	Dublin	OH
GSK	San Ramon	CA
Medtrainer Inc.	Redlands	CA