



Whole Person. Whole Team. Whole Communities.

A SUMMIT HOSTED BY THE NATIONAL CENTER
FOR MEDICAL-LEGAL PARTNERSHIP

About the Summit

You know how social factors impact individual and community health. You see how the resulting disparities affect you and people in your communities every day. Now, you want to learn about tangible, practical solutions. *Whole Person. Whole Team. Whole Communities.* is a two-day Summit exploring the ways in which laws and policies affect the physical, emotional, and mental health of individuals, hasten health care crises among the most vulnerable, and preserve health inequities that keep whole communities from thriving. This Summit is a chance for advocates, allied health professionals, consumers, lawyers, mental health professionals, nurses, physicians, public health professionals, social workers, and students of all disciplines to learn how multidisciplinary health care teams can harness the power of law and legal advocacy to confront health inequities, and thus improve health care for individual patients, tackle complex systems that influence physical and mental health, and build upstream policy solutions that enable communities to thrive.

Featured Speakers



Dr. Mona Hanna-Attisha
Physician, scientist and activist
who exposed the Flint water crisis



Bethany Johnson-Javois, MSW
Chief Executive Officer,
St. Louis Integrated Health Network
Formerly the Managing Director for
the Ferguson Commission

Submit a Session

The National Center for Medical-Legal Partnership is currently accepting workshop proposals and research poster abstracts. Guidelines and deadlines are included on pages 2 and 3.

DATES

Thursday, September 19, 2019
(opens at 9 a.m.) through
Friday, September 20, 2019
(adjourns at 3 p.m.)

LOCATION

Gaylord National Resort &
Conference Center
201 Waterfront Street
National Harbor, MD 20745

CONTINUING EDUCATION CREDIT

The Summit is accredited for
continuing legal, medical,
nursing, and social work credit.

MORE INFORMATION

For registration rates and more
info on the Summit, visit:

[www.medical-legalpartnership.org/
Summit](http://www.medical-legalpartnership.org/Summit)

QUESTIONS?

Contact NCMLP's Summit
Coordinator April Daniels at
aprilDaniels@gwu.edu

Workshop Proposal Guidelines

PROPOSAL DUE DATE

Monday, May 13, 2019
by 8 p.m. Eastern / 5 p.m. Pacific

SUBMISSION LINK

[Click here to submit a workshop proposal.](#)

DECISION NOTIFICATION

Applicants will be notified of the outcome by mid-June, in advance of the July 1 early bird registration deadline.

PRESENTER REGISTRATION

Workshop presenters are required to register for the Summit, and are eligible for a discounted tuition rate of \$325.

WHO SHOULD SUBMIT A PROPOSAL?

We encourage cross-sector proposals from the following, non-exhaustive list of people:

- Advocates and others from community-based organizations;
- Administrators and board members from health care organizations;
- Consumers / patients;
- Faculty, researchers, and students;
- Front-line practitioners, providers, and staff from allied health, health care, legal, medical, mental health, nursing, public health, and social work fields; and
- Representatives from government agencies and professional associations.

QUESTIONS?

Contact April Daniels at aprilDaniels@gwu.edu

Topic Priorities and Session Guidelines

Twenty-four proposals will be selected for 75-minute workshops. Sessions will be grouped into three tracks (1) Whole Person; (2) Whole Team; and (3) Whole Communities. Guidance for proposals in each track is listed below. You **DO NOT** need to work with a medical-legal partnership in order to present a workshop at the Summit. In all workshop tracks, preference will be given to proposals that take a layered approach and include a broad range of perspectives. Preference will also be given to proposals that include consumer presenters. NOTE: Full tuition and travel scholarships are available for consumers who present workshops.

PROPOSAL CRITERIA FOR THE WHOLE PERSON TRACK

Factors such as food access, housing, immigration status, and educational access make people more vulnerable to poor health. But what does it look like when health care organizations try to care for the whole person by addressing those issues, and what role can legal expertise and services play in helping health care teams and organizations do that? Successful proposals in this track will take a deep dive into one health-harming social factor (e.g. food insecurity, housing, undocumented immigration status, etc.) and its possible health effects (e.g., diabetes, uncontrolled asthma, toxic stress, etc.), and trace a health care organization's multidisciplinary response to that issue, including the role of legal services in addressing it. What happens when a patient in your health care organization presents with one of these issues or needs? How are they flagged? How does a clinician typically respond? What help is offered by the multidisciplinary team to help address patients' needs in these areas? Case studies are welcome.

PROPOSAL CRITERIA FOR THE WHOLE TEAM TRACK

Successful proposals in this track will explore the clinical environment and ways that integrating legal advocacy into a multidisciplinary health care team improves performance. Examples include topics related to workforce capacity, data exchange, workflow, quality improvement, and/or health equity. Sessions can also examine the increasing necessity for health care organizations to take up activism in the face of changes in laws or policies, such as the family separation policy, that threaten to worsen health outcomes for the most vulnerable patients. For example, if changes to the public charge rule will affect some patients' access to insurance, how can a multidisciplinary health care team rapidly respond so that patients understand the new landscape, and clinicians can effectively treat/advise patients in the face of uncertainty?

PROPOSAL CRITERIA FOR THE WHOLE COMMUNITIES TRACK

This track will focus on ways that community stakeholders of all kinds work together to proactively change legislative, regulatory, and administrative policies related to health and well-being. Sessions can explore both grassroots approaches to advocating for change in communities as well as efforts driven by health care institutions and payors. For example, a session may describe how parents, community-based organizations, health care team members, and lawyers drew on each other's strengths and experiences to successfully challenge a city lead ordinance. Another session might explore how hospital executives and data analysts harnessed big data to project the detrimental effects of a proposed policy change on the community. Proposals should describe how a community-wide problem was spotted, how the change was brought about, and the impact of that change. Sessions may also propose a vision for future endeavors that have the potential to improve the health and well-being of whole communities, even if the policy or other change has not yet occurred.

Research Poster Abstract Guidelines

PROPOSAL DUE DATE

Monday, June 10, 2019
by 8 p.m. Eastern / 5 p.m. Pacific

SUBMISSION LINK

[Click here to submit a research poster abstract.](#)

DECISION NOTIFICATION

Applicants will be notified of the outcome by mid-July.

PRESENTER REGISTRATION

Poster presenters are required to register for the Summit. They are not eligible for discounted tuition rates, however, they are welcome to apply for a Summit scholarship.

WHO SHOULD SUBMIT AN ABSTRACT?

We encourage cross-sector proposals from the following, non-exhaustive list of people:

- Advocates and others from community-based organizations;
- Administrators and board members from health care organizations;
- Consumers / patients;
- Faculty, researchers, and students;
- Front-line practitioners, providers, and staff from allied health, health care, legal, medical, mental health, nursing, public health, and social work fields; and
- Representatives from government agencies and professional associations.

QUESTIONS?

Contact April Daniels at
aprieldaniels@gwu.edu

About the Research Poster Presentations

We want to feature the newest and best quantitative and qualitative research highlighting the role that laws and legal policy play in things such as health equity, the value of an integrated approach to care, the health care workforce or system, and community level policy change. Twenty abstracts will be selected for poster presentations during an accredited poster session on Thursday, September 19 from 3:15 – 4:30 p.m. Posters will be grouped and displayed in three tracks: (1) Whole person, (2) Whole Team, and (3) Whole Communities. The poster session is accredited, meaning eligible attendees will receive continuing legal, medical, nursing, or social work education credit for attending, so authors are required to stand with their posters during this hour and hold discussions with participants who are circulating among the poster boards.

Abstract Guidelines and Selection Criteria

Abstracts must focus on original research and outline specific findings on the role that laws and legal policy play in things such as health equity, the value of an integrated approach to care, the health care workforce or system, or community level policy change. We seek two types of abstracts, those that share: (1) quantitative or qualitative data (including survey data, training data, or clinical data); and (2) descriptions of lessons learned about practice or policy innovations. If your research abstract describes the integration of services for a special population, it must include results from a needs assessment with clear methods and conclusions.

Abstracts will be evaluated based on: (1) How well the research considers multidisciplinary perspectives; (2) The quality and scope of the data being presented; and (3) The relevance of the findings for other organizations.