

## 2018 CPCA Quality Care Conference - Call for Presentations



### 1. 2018 CPCA Quality Care Conference

**Are you interested in presenting a session at the 2018 CPCA Quality Care Conference? The conference will take place in late February 2018 in Sacramento, California, and is an excellent opportunity to share promising practices that support innovative quality improvement and technological advancements in California's community health centers.**

**This year's conference will feature almost two full days of education and training weaving together themes of compliance, quality improvement, data analytics/data literacy, and technology.**

**CPCA is accepting abstracts for both general and break-out sessions. Each session is slated to last approximately 75-90 minutes which includes time for Q&A, and should have no more than 3 presenters. In order for your session to be considered, please complete this survey.**

**If your workshop is selected, up to 3 speakers per workshop will receive discounted registration for the conference, reimbursement for one night of hotel at the CPCA negotiated rate, and up to \$150 in additional travel costs.**

**The deadline for submissions is Tuesday, August 22, 2017. If you have any questions regarding this process or otherwise, please contact the CPCA Training Team at [training@cpc.org](mailto:training@cpc.org) or (916) 440-8170.**

**If you would like to preview what is requested in the survey, [click here](#).**

2018 CPCA Quality Care Conference - Call for Presentations



2. Session Abstract

To be considered for inclusion on the agenda for this event, please complete the full abstract.

\* 1. Topic Area (please select all that apply):

- Compliance
- Data Analytics/Data Literacy
- Quality Improvement
- Technology
- General Session/Keynote

\* 2. Please explain your target audience (i.e. Compliance/Privacy Officers, QI Coordinators, IT Administrators).

\* 3. What is the level of content to be presented?

- Beginner
- Intermediate
- Advanced

\* 4. Presentation Type (check all that apply)

- Lecture
- Group Panel
- PowerPoint

Other (please specify)

\* 5. Please describe how you intend to engage attendees and make at least 15-20 minutes of the workshop interactive (ex. role plays, case studies, audience polling, etc.). (Max of 300 characters)

Note: Interactive and engaging workshops will be prioritized in the selection process.

\* 6. Please list the title of your workshop.

\* 7. Please enter a workshop description (Max of 500 characters including spaces)

8. Please list 3-4 measurable learning objectives for this session, and how they will be met:

Learning Objective 1

Learning Objective 2

Learning Objective 3

Learning Objective 4

\* 9. CPCA will provide a screen, handheld microphone, a laptop, a podium, and a head table. Should you have any additional needs you will be responsible for the costs associated with ordering the equipment. Please indicate your agreement with these terms.

I Agree

I Do Not Agree

## 2018 CPCA Quality Care Conference - Call for Presentations



### 3. Contact Information

#### \* 1. Submission Contact

Name	<input type="text"/>
Current Position	<input type="text"/>
Company	<input type="text"/>
Company Address with City and State	<input type="text"/>
Phone Number	<input type="text"/>
E-mail Address	<input type="text"/>

Each session should have no more than 3 presenters. Please list the proposed speakers for this session below.

#### \* 2. Presenter 1

Name	<input type="text"/>
Current Position	<input type="text"/>
Company	<input type="text"/>
Company Address with City and State	<input type="text"/>
Phone Number	<input type="text"/>
E-mail Address	<input type="text"/>
Highest Degree Earned	<input type="text"/>
Presentation and Training Experience	<input type="text"/>
Qualifications to Present on Topic	<input type="text"/>

**3. Presenter 2 (Optional)**

Name	<input type="text"/>
Current Position	<input type="text"/>
Company	<input type="text"/>
Company Address with City and State	<input type="text"/>
Phone Number	<input type="text"/>
E-mail Address	<input type="text"/>
Highest Degree Earned	<input type="text"/>
Presentation and Training Experience	<input type="text"/>
Qualifications to Present on Topic	<input type="text"/>

**4. Presenter 3 (optional)**

Name	<input type="text"/>
Current Position	<input type="text"/>
Company	<input type="text"/>
Company Address with City and State	<input type="text"/>
Phone Number	<input type="text"/>
E-mail Address	<input type="text"/>
Highest Degree Earned	<input type="text"/>
Presentation and Training Experience	<input type="text"/>
Qualifications to Present on Topic	<input type="text"/>

**5. Please list any community health centers in California that you are currently working with, and the issue area:**

## 2018 CPCA Quality Care Conference - Call for Presentations



### 4. Wrap-Up

**Thank you for submitting this session abstract. The deadline for submissions is September 1, 2017. CPCA will be reviewing all submissions and will be contacting those selected by early winter 2017. If you have any questions regarding this process or otherwise, please contact the CPCA Training Team at [training@cpca.org](mailto:training@cpca.org) or (916) 440-8170.**

**You will now be redirected to the beginning of the survey where you will be able to submit additional sessions if you would like to do so.**