

# INTEGRATING PRIMARY and BEHAVIORAL HEALTH CARE THROUGH the LENS of PREVENTION

# **To Improve Population Level Outcomes**

March 15, 2019

# Dear Colleague:

The Southwest Prevention Center, a division of University of Oklahoma Outreach, is seeking workshop proposals for the fourth annual *Integrating Primary and Behavioral Health Care Through the Lens of Prevention Conference (IPBHC)*, November 13-15, 2019, in New Orleans, Louisiana.

Historically, planning for IPBHC 2019 has been focused on developing workshops and other forums that stimulate thinking for furthering the robust integration of prevention into physical and behavioral health treatment throughout the American health care system. IPBHC is seeking workshop proposals that provide instruction and insights for the *on-par* integration of prevention into substance misuse disorders treatment and mental health treatment within primary care.

# The purpose of the 2019 conference is to:

(1) continue communicating about the need for full integration of prevention into physical and behavioral health care and(2) initiate developmental plans that detail how to make prevention a natural and integral part of physical and behavioral health care.

# Four conference tracks will be facilitated:

Research, Education, Administrative/Systems and Practice

# **Preferred conference proposals include:**

- (1) examples of work where prevention practice is integrated into primary care services
- (2) ideas and innovative programs that integrate the prevention of substance abuse, mental health problems, and physical health issues
- (3) workshops focusing on the diverse prevention needs of persons in physical care settings. We are also focusing on the intersection of prevention with the integration of behavioral and physical care in addressing the needs of special populations including African

Americans; American Indians; Asians/Alaskan Natives/Pacific Islanders; Hispanics; Whites; persons with disabilities; and Gay, Lesbian, Bisexual, Transgendered and Questioning (LGBTQ) individuals.

In addition, the committee welcomes proposals that provide insights for peace officers recognizing the long-standing public health challenges they face including the increasing incidences of illicit and prescription-opioid drug abuse in the general population that lead to increases in the country's arrest and incarceration rates.

Further, the committee seeks workshop proposals that will increase conference attendance from professional groups. Importantly, it continues to be challenging to get some professionals to attend the conference even though their client groups are impacted by many of the issues addressed, i.e. common education and higher education professionals, nurses, public health providers, and health care policymakers.

# Five examples from 2018 to stimulate your thinking about 2019 proposal topics:

- (1) "Timely Managed Care for Integration of Behavioral Health, How is it Operationalized?"
- (2) "How to Integrate SBIRT: Process, Tips, and Examples"
- (3) "Educating the Integrated Primary Care Professional"
- (4) "The Impact of Health Disparities and Race on Primary and Behavioral Health Prevention Integration"
- (5) "The Research on Collaboration—Implications for Integrating Primary and Behavioral Health Care through the Lens of Prevention"

The goal for 2019 is to cover a few of the same topics presented in 2018 while presenting additional new topics that are consistent with the logic model. Proposals are also welcomed that address health needs in Indian country and other disenfranchised groups; trauma treatment; prevention coalitions and integrated health care; use of various mental health evaluation scales; prevention and integration research; the education of prevention specialists, physical and behavioral health professionals; etc.

Please submit your workshop proposal along with your bio by *June 30*, 2019. Acceptance notifications will be sent by August 1, 2019. Please take a few minutes to review the attached <u>CALL FOR PROPOSALS</u> <u>SUMMARY</u> and take a moment to review the appended logic model as it undergirds the purpose and direction of IPBHC.

Submit proposals online: <a href="https://preventionandhealthcare.ou.edu">https://preventionandhealthcare.ou.edu</a>.

If you want to discuss your workshop ideas, please contact Kathy Reynolds the 2019 IPBHC consultant at <a href="mailto:kmreynolds524@yahoo.com">kmreynolds524@yahoo.com</a> or Nina Barbee, Ph.D., one of the conference coordinators at <a href="mailto:nbarbee@ou.edu">nbarbee@ou.edu</a>.

Sincerely,

Belinda Biscoe, PhD, ICPS, OCADDPA
Interim Senior Associate Vice President for Outreach

College of Continuing Education The University of Oklahoma

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Attachments:

Call for Proposals Summary IPBHC Logic Model

### **CALL FOR PROPOSALS SUMMARY**

Thank you for your interest in presenting at the 4th annual Integrating Primary and Behavioral Health Care Through the Lens of Prevention conference (IPBHC). This conference is designed to enhance the national conversation on the role of *prevention* in the world of health care transformation—including initiatives that integrate behavioral health and primary care including primary care health homes and behavioral health homes created under provisions of the Affordable Care Act and the integration of prevention services with addiction, mental health and primary care services. We value proposals that emphasize communities in transition; culturally relevant and responsive prevention in and with primary care; sustainability through community partnerships such as healthcare neighborhoods, infrastructure enhancement, and policy development. The primary focus for the 2019 conference will be to continue the discussion on how all types of prevention services—substance use prevention, mental health promotion, and wellness through primary care can come together in a comprehensive way to support health communities. In 2019, we welcome presentations on a wide spectrum of prevention topics and issues that will spark conversation, support the development of an integrated prevention infrastructure and provide examples of communities where this happening. The conference date has been established for November 13-15, 2019 in New Orleans, LA.

We are looking for workshop submissions that emphasize:

- Local, State and Federal Policy
  - How will or does policy need to change to support the concept of Integration Prevention services
  - Examples of community policy changes that support this concept
  - Conceptual models for the integration through the lens of prevention and across silos
- Practice and/or Service
  - How will treatment and prevention practice change in an integrated model
  - o Examples of integrated addiction prevention and treatment programs
  - Examples of integrated prevention services with primary care
  - How the law enforcement establishment can improve its police and community service functions with the advent of prevention into primary and behavioral health care
- Administrative/System
  - o How will the system of health care delivery look through the lens of prevention
  - o Examples of system integration that incorporates the existing silos of prevention
  - Conceptual models for health neighborhoods that integrate prevention services
- Research and Education
  - What existing research can be used to guide the various discussions that are needed
  - What is needed for the elevator speech
  - What new education will the existing workforce need to implement health care integration and the establishment of prevention

## **CONFERENCE PARTICIPANTS**

(Information about the professionals your presentation will address)

The conference will be targeted to a wide array of individuals, professional groups and organizations from multiple backgrounds, approaches, and disciplines—among them:

- Addiction prevention and treatment professionals
- Mental health promotion and treatment professionals
- Physical health practitioners
- Policy makers from local, state, and federal levels
- Researchers from prevention and treatment
- Educators from schools of social work, psychology, sociology, public health, and medicine
- Community activists and advocates
- Law enforcement officials from police chiefs to officers on the beat
- Public school professionals

## PRESENTATION FORMAT

Workshop sessions will be 90 minutes in length and the conference committee prefers interactive workshops. Didactic workshops will be accepted, but it is preferred that the didactic portion of the workshop be limited to no more than 45 minutes with the remaining time left for questions and interaction with the audience. When submitting your presentation proposal—please note how you will engage the audience in the workshop. Panel presentations are acceptable as well, but must also include provisions for audience participation.

# **REVIEW CRITERIA**

- 1. Relevance to the conference and core focus areas—i.e., the role of prevention in health integration and initiatives that incorporate behavioral and primary care, including primary care health homes and behavioral health homes
- 2. Existence of a well-defined syllabus and learning objectives that will meet CEU/CME credit requirements
- Evidence that issues of cultural relevance and competency are clearly addressed
- 4. Originality of presentation style and opportunities for participant involvement
- 5. The attachment of power points with the proposal submission

# National Conference Promoting the Integration of Primary and Behavioral Healthcare through the Lens of Prevention to Improve **Population-Level Outcomes**

LOGIC MODEL

	And: Expanding the reach of prevention within healthcare	C	into integrated healthcare  -	With: An Emphasis on	000 0000 000 M	and Practice Tracks	Research, Policy, Education	Content will include	Principles	Clidiye	worklorde on this paradigm	Education of existing and inture	across prevention services	<ul> <li>Focus on improved outcomes</li> </ul>	more unified voice	related to prevention to create a	<ul> <li>Consolidation of activities</li> </ul>	primary care	across SUD, Mental Health and	<ul> <li>Definition of prevention that cuts</li> </ul>	the new healthcare landscape	<ul> <li>Discussions to clarify its role in</li> </ul>	benefit from:	Needs: The Prevention field could	block grant.	can be found in the Substance Abuse	Small amounts of prevention dollars	or substance use disorders (SUD)	care but none for mental health (MH)	prevention dollars for physical health	Affordable Care Act includes	attention to prevention. The	integrating treatment with little	the country has focused on	Needs/Context	National States
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	and resources for prevention		means and willingness to	3) Perception about what prevention		<ol><li>Connecting with the desired</li></ol>		<ol> <li>Disparate definitions of</li> </ol>	Challenges & Barriers			Comordina de Comordo	Conference Sponsors	functions suitable to need	All offs based conference	conference to gather data	Focus group session(s) at	<ul> <li>National Experts/Speakers</li> </ul>	expertise	<ul> <li>Planning Committee</li> </ul>	Inputs		Law Enforcement	psychologists	<ul> <li>Clinical and community</li> </ul>	Social Workers, etc.	including Counselors, Nurses,	<ul> <li>Public School Professionals</li> </ul>	<ul> <li>Researchers and Evaluators</li> </ul>	State and Local Levels	<ul> <li>Policy Makers from Federal,</li> </ul>	services	prevention and/or treatment	care settings that work in/on	larget Groups/Attendees	1 ()
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<ul> <li>Ignite creativity and innovation in p</li> </ul>	<ul> <li>Create a unified approach and strategic agenda, across behavioral health and primary care groups, that solidifies the role of prevention in integrated healthcare</li> </ul>		Goal(s)/System	11) Provide workforce development	prevention services	<ol><li>Access infrastructure needs for</li></ol>	across health care			integrated care	public health approaches into		<ol> <li>Introduce population health</li> </ol>	health integration	prevention that can support	individuals wo	<li>6) Identify transferable skills of</li>	Practice:		<ol><li>Address education of the</li></ol>	recovery in primary care	strategies that will support	<ol> <li>Identify existing prevention</li> </ol>	health discussion	prevention in the integrated	<ol><li>Compile the science for/of</li></ol>	Research and Education:	integrated care	on the role of prevention in	<ol><li>Create a "thought leader" paper</li></ol>		dialogue about the role of	Align with the existing federal		Strategies	Ctrataciae
Ignite creativity and innovation in prevention education and service outcome	ategic agenda, across behavioral difies the role of prevention in inte		Goal(s)/Systems Change/Impact		integration	includes prevention as part of	the current and future workforce tha	in the educational process involving	prevention and promotion. Changes	that includes population-based	behavioral health and primary care	<b>Long Term</b> : Parity between		through the lens of prevention	promote the integration of healthcar	policies, practices and funding that	Development and implementation of		prevention	must be present in some types of	care, including unique aspects that	across SUD, MH, and primary healtl	for a definition of prevention that cut	Intermediate: A common foundation		its benefits in integrated health care	understanding of prevention's role a	Increase knowledge and		country	role in integrated care across the	to define prevention and determine	for a range of groups that are working	Short-Term – Serve as a launching p	Outcomes	O. A. Daniel

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Ignite creativity and innovation in prevention education and service outcomes