Sunday November 3, 2019 – Pre-Conference

Connections and Thriving Communities: Schools, Mental Health & Safety
(8:30 Continental Breakfast)

9:00 AM – 3:15 PM (Lunch will be provided)

The pre-conference will address the four critical factors necessary for integrating care with a focus on the timely topic of School Mental Health and Safety. Presentations will focus on approaches used by first responders in relation to families and communities, what behavioral health providers are doing with regard to prevention, intervention and school based mental health and what state behavioral health agencies are doing to address school mental health and safety in collaboration with other systems, providers and communities.

**Moderators:** Brian Hepburn, MD, Executive Director – National Association of State Mental Health Program Directors/National Dialogues on Behavioral Health/Meighan Haupt, MS, Chief of Staff, National Association of State Mental Health Program Directors/National Dialogues on Behavioral Health - (VA)

**Speakers:** Andrea Duarte LCSW/MPH, Program Manager, Dept. of MH/Addiction Services (CT); Sharon Hoover, PhD, Associate Professor of Psychiatry, Co-Director, Center for School Mental Health, Univ. of Maryland School of Medicine (MD); Bethany Sclafani, LCSW-BACS, School Based Therapy Program Director, Capitol Area Human Services; Kathy Edmonston, BA, Parent Facilitator, LSSC, Ascension Parish Schools (LA); Holley Galland, MD, School Based Mental Health Physician (LA); Eric Tadehara, LCSW/MPA, Assistant Director, Children’s Behavioral Health, Dept. of Human Services (UT); Patricia Babcock, PhD, Deputy Secretary, Dept. of Children and Family Services (FL)
Monday November 4th, 2019
(8:00 AM Continental Breakfast)

8:30 AM – 8:45 AM  Welcome and Introductions

Mary E. Smith, Ph.D. – President, National Dialogues on Behavioral Health

8:45 AM – 9:00 AM  Conference Overview

9:00 AM to Noon  
**Terms of Engagement: Key First Step to Connecting Care**

Engagement is defined as participation, sharing or involvement. In behavioral health, we may talk about the engagement of an individual in their care, but are we engaging all of the parties who may need to participate in the care of this individual. Are we really connecting care? Recent efforts toward integrated care have focused on the integration of health and mental health services. If we step back and look at all factors that may impact someone’s overall health, we know that we may be missing other critical areas of their care. These other critical areas may not be services that we provide but who can address them? Who else do we need to engage? How do we make the connection?

Engagement can occur on every level – from payor to provider to consumers and families and peers as well as to the community. Stakeholders include health and mental health but also include schools, social services, and law enforcement. Needed services can range from crisis responsiveness to counseling to peer support to housing and food. There are still silos of services and blinders to getting at the root causes of some problems but engaging each other in the conversation can help to overcome the gaps and connect the care. We need to identify who the players are, what their roles are, how we engage with each other, how we can engage to get to connected care with training, data, communication.

*Speakers: Marie Williams, LCSW, Commissioner, Tennessee Dept. of Mental Health and Substance Abuse Services (TN); Captain Chris McKee, BA (Retired) - Law Enforcement (CT); Lacy DiCharry, MS, MBA, LSU Leadership Development Institute and LacyDee Consulting (LA)*

Noon – 1:30 PM  Lunch on Your Own
1:30 PM to 4:30 PM

**Collaboration: An Essential Building Block for Creating Value**

An understanding of, and appreciation for collaborations within most fields has expanded greatly in the past decade and this is especially true as communities grapple with responding to individuals with complex needs. However, while the definition of collaboration can be simply stated as “the situation of two or more people working together to create or achieve the same thing”, a true collaboration is not as simple as its definition sounds. Creating and maintaining a collaboration is not easy.

Collaborations can exist at many levels but the needs of the at risk individual must remain central regardless of the number of providers, the size of the system serving them, or how far reaching their support system must become. With a greater understanding of the social determinants of health, it is clear now that hospitals, clinics and health systems alone cannot produce the most desirable outcomes for individuals with complex needs that span multiple systems.

This session will share novel models of successful collaborations created to address a variety of behavioral and physical health needs ranging from public health outbreaks and epidemics, emergencies, homelessness, over incarceration and reentry, and managing community-based behavioral health crises. Participants will learn how to create a successful collaboration by accurately identifying stakeholders, bring them to the table and identify incentives for them to become lasting partners/participants. Presenters will discuss systems design challenges, incentives, financing, cost-savings models, data collection and sharing within existing laws, and identifying measurable outcomes to document and track improvements.

*Speak*ers: Karya Lustig, MA – Director, Center for Leadership and Practice at the Public Health Institute (CA); Jan Tarantino, LMSW, Resources for Human Development (LA); Associate Justice Dawn Beam, Mississippi Supreme Court (MS)

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**RECEPTION 4:45 PM – 6:00 PM – Renaissance Arts Hotel Art Gallery – 1st Floor**

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**Tuesday November 5th, 2019**

*(8:00 AM Continental Breakfast)*

8:30 AM - 8:40 AM     Welcome

8:40 AM to 11:45 AM

**Connecting Care: Examples of Why, Who & How**

Integrated care can have multiple meanings, including the systematic coordination of primary and behavioral healthcare; co-location; blending finances; and/or a partial blending of general and behavioral health services. There is not a national definition of integrated care and it can mean different things to different professions and stakeholders. However, integration does not necessarily mean that physical and behavioral health care across systems or professions is being clearly connected for the individual and/or family members involved.
Engagement and collaborations establish the foundation for physicians, peers, nurses, behavioral health professionals, and other professionals to connect care. Connecting care has these professionals share responsibility for an individual’s well-being and work as a team. While connecting care is not a new concept and is being done in many places, it is not consistently and universally being implemented. This presentation will address connecting care by discussing the following issues:

- What is needed to connect care? What can be done to implement connecting care consistently? What have been the professional and financial barriers?
- What does connecting care look like? What are best practice examples of connecting care? How did the relationship get created to connect the care?
- What is the role of physicians and behavioral health providers in connecting care? How can professions such as navigators, case managers, and peer leaders assist in connecting care?

How can the use of technological tools help connect care in both urban and rural/frontier settings?

Speakers: Tiffany Anderson-Washington, DPC, Mobile Crisis Team Coordinator, Hinds Behavioral Health (MS); Elizabeth Peterson, MPH, Project Manager, Accountable Health Community, Santa Fe County Community Services Dept. (NM); Harold Brandt, MD, The Baton Rouge Clinic – AMC (LA)

11:45 AM – 1:30 PM Lunch on Your Own

1:30 PM to 4:30 PM

Outcomes: Measuring Value

Outcomes are the major linchpin in any systemic intervention, both in terms of assessing if intended impact was achieved and in terms of providing feedback to the change process to determine if revisions or adjustments are needed. Despite progress in the development of behavioral health outcomes over the previous two decades, the state-of-the-art remains fraught in an entangled range of approaches, applications, measures and methodological issues.

Over the last two decades, outcomes systems have been developed for an individual consumer (including measures of recovery and resilience), for provider systems, for a specific intervention, for a system of care, for cross-system relationships, and for social determinants and population-level approaches. Given this diversity, the new trend towards value-based payments and contracting in healthcare has resulted in a resurgence of interest in behavioral health as to how the field will address the issue.

Each approach to outcomes has been developed for a different purpose or setting but these are often confounded or misunderstood. For example, while HEDIS measures are helpful in some settings, they do not address concerns related to outcomes from a recovery or resilience perspective.

This session will review these different approaches and will propose solutions with regard to how to develop outcomes that will be responsive at different levels to the emergent models of behavioral healthcare, such as integrated care, connected care and social determinants approaches. A major challenge is developing measures for intermediate outcomes (outcomes that precede achievement of consumer outcomes) related to engagement, collaboration and coordination.

Speakers: Vijay Ganju, PhD, President - Behavioral Health Knowledge Management (TX); Jennifer Black, MA, Vice President, Head of Business Development and Strategy, Beacon Health Options (CT); Andrew Cleek, PsyD, Chief Program Officer McSilver Institute Executive Officer (NY) and Meaghan
8:40 AM to 11:15 AM  
**Value Based Approaches: Challenges and Opportunities**

Over the past 2 days, while we have focused on critical components such as engagement, collaboration, connecting care and outcomes, the purpose has been to build value, both for the individuals being served and the communities in which they live. When value-based purchasing is built on these underlying values, the result is a solid outcome-focused foundation. The challenge is that many of the approaches to value-based purchasing do not incorporate the different factors we have been addressing at the conference in their value-based measurement approaches.

The purpose of this session is to review the various approaches to value-based measurement and to explore how the definition and the measurement of value in ways that include engagement, collaboration and connected care (components that are essential for successful outcomes) are included, and the challenges that exist in incorporating them. This session will also explore how the key operational concepts developed earlier in this conference—engagement, collaboration, and connecting care—have been used in community-wide programs designed to improve health, well-being, and prosperity to both create and measure value. Without the incorporation of these key tenets in the definition of value, these different domains will not get the emphasis they deserve.

**Speakers:** Nick Macchione, MS/MPH, Agency Director, San Diego County Health and Human Services (CA); Selina Hickman, BA, Director of Policy, Department of Mental Health (VT) and Alison Krompf, MA, Director of Quality and Accountability, Department of Mental Health (VT)

11:15 AM to 11:30 AM  
**Discussion and Wrap-up**

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**National Dialogues on Behavioral Health Executive Board**
Mary E. Smith, PhD – President (IL), James Dunaway – Co-Treasurer (MS), Jacqueline A. Fleming, LCSW - Co-Treasurer (MS), Deborah Westvold, LISW - Secretary (IA), Vijay Ganju, PhD – Business Development (TX), Grant Drawve, PhD (AR), Hilary Hamlin, MPA/MSSW (GA), Brian Hepburn, MD (VA)/Meighan Haupt, MS (VA), Jan Kasofsky PhD (LA), Debra Kupfer, MHS (CO), Ronald Manderscheid, PhD (DC), Melanie Norwood, MS (MS), Stephen Phillippi, PhD/LCSW/CFC (LA)