



10th Annual Evidence-Based Practices Symposium: Building a Life Beyond Homelessness

June 16-17, 2020 | Sacramento, CA

CALL FOR PROPOSALS

PRESENTATIONS | WORKSHOPS | POSTERS

Submission Deadline: March 9, 2020 at 11:59 p.m. PST

PROPOSAL SUBMISSION INSTRUCTIONS:

To submit a <u>Professional Presentation</u> or <u>Panel Discussion Proposal</u>, please complete the online submission form at:

https://www.surveygizmo.com/s3/5392140/2020EBP-Presentation-Proposal

To submit a <u>Poster Proposal</u>, please complete the online submission form at: https://www.surveygizmo.com/s3/5418964/2020EBP-Poster-Proposal

The California Institute for Behavioral Health Solutions (CIBHS) invites you to submit a proposal to present at the 10th Annual Evidence-Based Practices Symposium: Building a Life Beyond Homelessness, scheduled for June 16-17, 2020. The event is co-sponsored by the California Department of Health Care Services (DHCS) and will be held in Sacramento.

This year's EBP Symposium is focused on evidence-based practices that support improved behavioral health outcomes for adults, children, and families who are homeless, at risk for homelessness, or facing housing insecurity. Workshops and presentations will include a continuum of evidence-based practices that support improved behavioral health outcomes. To capture the full range of evidence-based practices, the symposium will highlight practices that have demonstrated effectiveness at the highest standards, promising practices that have strong initial evidence, emerging and community-defined practices demonstrating localized success, and innovative practices that adapt clinical knowledge to current conditions. The symposium will also highlight innovative multi-system and population health focused collaborations that encompass the intersecting issues of behavioral health, homelessness, housing, and social determinants of health.

Each year, this conference brings together behavioral health practitioners, administrators, agencies, funders, and advocates to learn more about effective practices, approaches, and





strategies for improving the lives of adults, youth, children, and families receiving behavioral health services. In recent years, the symposium has also attracted healthcare, education, forensic, and other professionals in areas with an interest in improving life outcomes for shared constituents. We hope to broaden the range of participation and collaboration even further with this multi-sector theme.

Background

California is currently facing a homelessness and housing crisis on a scale never seen. Nearly 25% of the nation's homeless were counted in California in 2018. This represents 130,000 homeless individuals, including 6,700 families, 12,400 homeless young adults, 10,800 veterans, and 34,300 adults (U.S. Dept of Housing and Urban Development, 2018). Some individuals who are homeless also report having a serious mental illness (1 in 4) or substance use disorder (1 in 6; Los Angeles Homeless Services Authority, 2018). Rising housing costs and lack of affordable housing contribute to this crisis in California (National Low Income Housing Coalition, 2018). The housing shortage is estimated at over one million homes for low income individuals and families. More than half of renters in California spend 30% or more of their income on housing, and 1 in 4 pay 50% or more in housing costs.

While most of California's homeless population resides in major metropolitan areas, the problem of homelessness and housing insecurity negatively impacts communities of all sizes. As a behavioral health delivery system, we need to invest in and disseminate evidence-based practices and system strategies that are responsive to different types of homelessness and housing insecurity while also ensuring that best practices are continually evaluated and adapted accordingly to obtain successful outcomes for various populations.

The inter-relationships between behavioral health conditions, substance use problems, housing insecurity, and homelessness present a complex, multi-system problem. Despite the multitude of resources and engagement of multiple social systems, experiences of homelessness are traumatic events that have negative impacts on the behavioral health of adults, children, and families.

Although the promotion and use of evidence-based practices continues to grow within the fields of affordable housing, homeless services, and behavioral health, we observe that a broad dissemination and integration of evidence-based approaches into routine practice remains relatively low. At the same time, there is an increasing need for systems engaging in this type of work to be more aware of the outcomes they are currently producing as well as strive to continuously improve housing and homelessness outcomes by employing practices and strategies that have demonstrated effectiveness. Since the goal of providers is to best serve their clients while making the most efficient use of limited resources, the proven cost-effectiveness of most evidence-based practices can be a strong incentive for the adoption of such practices.





About CIBHS

Established in 1993, the California Institute for Behavioral Health Solutions (CIBHS) is a mission-driven behavioral health consultancy with extensive expertise in the areas of quality improvement of systems and programs, effective practice implementation, and evaluation. Our commitment is to improve the lives of people with behavioral health needs. To this end, CIBHS strives to improve and strengthen the behavioral health care delivery system in a continual effort to produce exemplary outcomes. Our belief is that the most effective behavioral health system is one that is person-centered, recovery-oriented, strengths-based, culturally responsive, focused on health equity, and addresses social determinants of health. CIBHS works with a diverse array of stakeholders. While the focus of CIBHS has been historically devoted to serving the needs of county behavioral health organizations and providers, our reach has extended to other states and countries.

Proposal Instructions

We are seeking proposals that draw attention to a continuum of evidence-based practices related to outreach and engagement of individuals and families who are homeless; practices related to emergency shelter, transitional housing, rapid rehousing, and permanent supportive housing; practices related to increasing housing retention; community- and systems-level interventions related to housing; community-defined practices that support improved housing or homeless outcomes; and the role of peers in practice implementation. In addition, we are interested in submissions that focus on technical assistance, such as presentations that serve as "how-to" guides for implementing evidence-based practices or promising practices. We also welcome submission from professions in allied fields (e.g., Criminal Justice, Health Care, Education, Law, Public Health, Social Services, Affordable/Supportive Housing) with whom we collaborate and whose work informs the behavioral health delivery system.

Proposals may address, but are not limited to, the following topics within behavioral health, substance use, housing, and homelessness:

- Assertive Community Treatment (ACT)
- Coordinated Entry Systems
- Community Reinforcement Approach
- Crisis Intervention Team (CIT) Training
- Critical Time Intervention (CTI)
- Discharge planning
- Homeless job training programs





- Housing First, Permanent Supportive Housing, or other supported housing models
- Individual Placement & Support (IPS) model of supported employment
- Innovative use of peer support services in housing or homeless programs
- Landlord engagement
- Medication Assisted Treatment
- Mental Health/Drug Court
- Rapid Re-housing
- Sober Living Recovery Houses
- SSI/SSDI Outreach, Access and Recovery (SOAR) programs
- Street outreach for homeless
- Strengths Model Case Management
- Tenant-based rental subsidies

Guidelines for Proposals

- All proposals will need to include:
 - o Contact information and current resume or CV for each presenter
 - Abstract (50 words)
 - Program Summary
 - 3 Learning Objectives (not required for poster submission)
- Presentations are allotted 60-75 minutes for presentation and 15 minutes for questions and answers.
- Deadline for all submissions is March 9, 2020 at 11:59pm PST
- Strong consideration will be given to presentations that would include voices of those persons with lived experiences.
- Follow the online submission form instructions closely to assure that your proposal is received and reviewed. For questions about submitting a proposal, please contact Shirley Chan at sychan@cibhs.org.





Types of Submissions

- Professional Presentation: Professional presentations focus on a specific topic and may be an individual (1 presenter) or panel presentation (a maximum of 3 presenters).
 Presentations that offer a continuum of evidence-based practices including promising practices, emerging and community-defined practices, and innovative practices are encouraged.
- Panel Discussion: This format is intended as a forum for overarching questions/issues, not for presentation of specific practices. The panel is an engaging conversation among 3-4 presenters and the audience about ideas, methods, or practice-related experiences. A central question or theme should serve as the focus for the panel discussion. The audience will be given 30 minutes to respond to the questions/issues raised and to introduce additional questions and comments to the panel.
- **Poster Presentation:** Posters are individual, free-standing presentations of promising, emerging, or community-defined practices with initial quantitative and qualitative evidence. They are the appropriate format when material can be explained briefly, is suited for graphic, visual, or interactive presentation, and/or the presenter would benefit from high levels of interaction and discussion. Presenters should plan to stay with their poster during the scheduled viewing time(s) and posters will remain available for viewing throughout the conference during breaks. Specific guidelines for printing the poster as well as easel information will be provided upon acceptance.

Continuing Education Guidelines for Proposal Submissions

It is our goal to be able to provide Continuing Education (CE) credit for each session added to the agenda. Accepted proposals must adhere to the definition of Continuing Education in that they improve service to the public and enhance contributions to the profession. All presentation proposals must demonstrate their relevance to the professional education of the intended audience, their advanced level of training, and their contribution to consumer care. In your proposal, please be sure to include these elements, including learning objectives, where appropriate, so that we have enough information to be able to determine if your presentation should be added and attendees can be given credit for attending.

For questions regarding CE and/or learning objectives, please contact Gerilyn Walcott at gwalcott@cibhs.org or Theresa Ferrini at tferrini@cibhs.org.





Online Submission Form Instructions

Please note: The <u>online submission forms</u> (see Page 1) are available now. A completed form for each submission is required. *Changes cannot be made after the submission deadline, March 9.*

- 1. Select **one** of the following submission types: Professional Presentation, Panel Discussion, or Poster Presentation.
- 2. Section a desired **Amount of Time for Presentation (not required for poster presentations):** 75 minutes (60 minutes presentation plus 15 minutes Q&A) or 90 minutes (75 minutes presentation plus 15 minutes Q&A).
- 3. Please enter a complete formal name, official title, agency/organizational affiliation, address, current email address, and phone number for each presenter.
- 4. One person must enter all information for an entire submission.
- 5. **Title:** Enter a title for the submission with no more than 15 words. Use mixed-case letters (upper-case for the first letter of all words with 4 or more letters and lower-case letters for the remainder of the words) and appropriate punctuation.
- 6. Abstracts, presentation summaries, and subject matter references entered for submissions must be typed or copied and pasted into a text box in the online submission form. Note: Your abstract and presentation summary should be in final form as it will be viewable in the symposium program.
- Abstract: Enter a brief description (50 words or less) of your professional presentation, panel discussion, or poster presentation. This description will appear in the symposium program.
- 8. **Presentation Summary:** Please enter a detailed summary of your presentation. We recommend a 750-word summary; please use as many words desired for your presentation summary. The presentation summary may include: a detailed description of an evidence-based, promising, emerging, or community-defined practice; target population; characteristics of individuals served; outcomes for homelessness, housing, and/or behavioral health; and findings or impact of practice on outcomes.

Your proposal must adhere to the definition of continuing education (e.g., improve service to the public, enhance contributions to the profession). Your summary must demonstrate its relevance to the professional education of the intended audience, their advanced level of training, and their contribution to consumer care. In your summary, please be sure to include these elements where appropriate and where they support the learning objectives. A list of the topics that are planned to be covered and how you plan to deliver them is insufficient as a detailed summary of your presentation.

This section serves as the bridge linking the Learning Objectives and the Subject Matter References. It should outline how the learning objectives will be achieved utilizing the





information planned to be presented and should tie in the sources of the information provided. It should prove that the content being presented is grounded in an evidence-based approach.

9. Educational Objectives (not required for poster presentations): Enter at least 3 educational objectives. Objectives are not a list of the topics to be covered but must clearly define what the participant will know or be able to do as a result of having attended the program, and these objectives must be stated in measurable terms. They are used to measure the efficacy of the instructor making the clear connection between the content being delivered and application of the content within the learner's professional context. Refer to Pages 9-11 as a guide to helping you choose the correct verbs for your learning objectives. All objectives must start with "As a result of attending this training, how satisfied are you that you are able to..." then utilize at least one of the approved verbs.

Here is an example of a well-written learning objective:

"As a result of attending this training, how satisfied are you that you are able to explain two ways that the Strengths Model can be used to design service delivery systems for justice-involved individuals."

10. Subject Matter References (not required for poster presentations): Enter at least three references for each submission. Subject Matter References are needed to demonstrate the knowledge base(s) being utilized as the foundation of the training. Include relevant references for addressing the empirical support of the evidence-based content by either established research or peer-reviewed, published support for your topic.

Here is are examples of the format we are looking for:

Online reference:

Exercising while Learning Boost Test Scores, study finds, http://health.usnews.com/health-news/family-health/brain-andbehavior/articles/2011/05/02/exercising-while-learning-boosts-testscores-study-finds. Established Research.

Published text reference:

Gendreau, P., Goggin, C., and Smith, P. (2000). The forgotten issue in effective correctional treatment: Program implementation. *International Journal of Offender Therapy and Comparative Criminology*, 43, 180-187. Peer Reviewed.

11. **Biography:** Each presenter needs to submit a brief biography consisting of a paragraph of no more than 250 words. This biography will be incorporated into a listing of the Professional Bios with those from the other presenters and distributed to attendees at the conference as well as used to introduce you.





- 12. Resume or CV File Upload (not required for poster presentations): Each presenter's resume or CV file must be in Adobe PDF format. Each resume or CV should be uploaded in the online submission form. Each presenter's resume or CV will be used to verify their education level and/or the experience level of the presenter in the subject matter in which they will be presenting.
- 13. Audio Visual Needs (not required for poster presentations): CIBHS will provide all the audio-visual equipment for the meeting. The meeting rooms will be set with the appropriate audio-visual equipment depending on the format of the presentation. The standard set up will include a screen, LCD projector, laptop, lectern/podium and microphone. If you will need sound for your presentations or you will be watching a DVD, you will need to request an audio patch. Panel presentations will include a head table. In larger rooms, there will be a riser and additional microphones as needed.
 - a. Confirm that you do not need any audio-visual equipment and do not need internet.
 - b. If you require additional audio-visual equipment, please list your specific needs.
- 14. After the submission deadline, March 9, no revisions can be made.

Additional Information

- One complimentary registration is allotted per presentation. If you plan to have more than one presenter, please list as A, B and C. The person listed as A will be considered the primary presenter for whom the registration fee will be waived.
- CIBHS will include your PowerPoint and handouts along with those from the other
 presenters and make them available on our website for download as well as on the
 conference mobile app prior to the start of the Symposium. NOTE: You can provide
 CIBHS with the PDF file of your other resource material for inclusion on the CIBHS
 website to be posted after the event.
- No demonstration or endorsement of commercial products will be permissible in educational sessions.
- CIBHS will provide all the necessary audio-visual equipment. Please refer to the online submission form for more information or to request additional equipment.

Presenter Deadlines

March 9, 2020 Deadline for submitting proposals

Late March Notification of accepted proposals

June 1, 2020 Deadline for sending presentation and handouts to CIBHS

June 16-17, 2020 10th Annual EBP Symposium





Tips for Writing Educational Objectives

Here are some helpful tips to be able to write objectives that will get approved. Please use these guidelines in your phrasing.

There should be a <u>clear description of what the attendee will know or can do because of attending training AND relate those gains to benefits to the constituent or the system by which constituents are served.</u> There is not an either/or option!! The objectives must cover both concepts in one sentence.

For an example of what **NOT** to write:

Participants will be able to: (this is how ALL should start)

- Participants will be able to learn advanced "Skillstreaming" group facilitation skills.

Not only does the above objective use a word (learn) that is on the "Verbs to Avoid" list, but it only states what the attendee will know after the training. Here is an example of how to modify that objective to get it approved:

 Participants will be able to implement the advanced "Skillstreaming" group facilitation skills in their workplace to improve group discussions.

Objectives also need to be tied to improving individual consumer outcomes or improving the system of care. To put it simply, this means that there needs to be a cause and affect outlined in the objectives. There is always a goal of each training, and these should be clearly outlined in the objectives. Not just what you are hoping they will learn, but what you are hoping they will do with that knowledge.





Verbs for Formulating Objectives and Measuring Change Relative to the Updated Compliance Criteria *

Verbs to Avoid Discuss Design Performance Appreciate Distinguish Detect Act / Act Upon Know Estimate Formulate Ask Learn Explain Generalize Avoid Review Express Integrate Change Study Extrapolate Manage Check Understand Interpolate Collaborate Organize Update Interpret Plan Communicate Locate Prepare Coordinate Knowledge Predict Prescribe Decrease Cite Produce Demonstrate Report Count Restate Propose Diagnose Define Review Specify Do / Don't Translate Document Draw Name Competency Empathize Identify Knowledge Apply Examine Indicate Analyzed Calculate Hold Complete List Analyze Incorporate Point Appraise Demonstrate Increase Quote Contract Dramatize Inquire Read Criticize Employ Integrate Recite Debate Examine Involve Recognize Detect Illustrate Internalize Record Interpolate Listen Diagram Relate Differentiate Manage Interpret Repeat Distinguish Locate Massage State Experiment Operate Measure Select Infer Order Obtain Tabulate Inspect Practice Order Trace Inventory Predict Perform Write Question Relate Prescribe Separate Palpate Report Knowledge Summarize Restate Pass Understood Percuss Review Associate Knowledge Schedule Refer Synthesized Tell Classify Sketch Compare Arrange Solve Treat Compute Assemble Translate Use Use Contrast Collect Utilize Describe Compose Utilize Write Differentiate Construct

Create

^{*} Adapted from "Stating Objectives" by Adrienne B. Rosof in Continuing Medical Education: A Primer (Adrienne B. Rosof and William C. Felch MD, Editors), Praeger Publishers, New York, 1986, pp. 36-37.