Implementing Best Practices in Integrated Care

The National Council for Behavioral Health has produced a series of brief instructional videos in partnership with the New York State Delivery System Reform Incentive Payment (DSRIP) Program to help demonstrate actions you can take to implement best practices within an integrated care setting, such as a warm handoff and a morning team huddle. Check out the videos, which are all accessible for free here!

Save the Date!

We are planning for a webinar in August to provide a policy-level perspective of the implications of marijuana legalization and a practical implementation guide for clinicians when talking with clients about marijuana use. Mark your calendars and keep your eyes open for registration information!

Don’t Forget!
SBIRT ESSENTIALS
Setting a Standard for Opioid Use Disorder Treatment

In conjunction with a national practice guideline that they recently released, the American Society of Addiction Medicine (ASAM) is offering a course in which participants can learn about the guideline’s identification of current practices and recommendations for the safe and effective use of medications for the treatment of opioid use disorder. By the end, enrollees will walk away with new knowledge on how to properly evaluate and treat a client addicted to opioids. Access the free course here.

Underage Drinking Town Hall Meetings: Educating, Mobilizing and Starting the Dialogue

Do you want to have direct impact in leading the effort around underage drinking prevention in your community? Every two years, SAMHSA offers stipends to behavioral health organizations to host town hall meetings – and since 2006, more than 8,000 of these meetings have been held across the country. Ready to get started? Find tips and tools on the Stop Alcohol Abuse website, and click here to find underage drinking prevention resources for your state.

Treating Chronic Pain in the Age of Marijuana Legalization

Medical cannabis use for the treatment of chronic pain has become an increasingly hot topic among providers and patients alike. In light of this, the Alcohol & Drug Abuse Institute at the University of Washington is offering a training designed for healthcare providers to learn about research updates and best clinical practices. CEUs are available for this course and corresponding toolkit, accessible here.

We will be holding a webinar on June 9 highlighting staffing considerations, workforce development and training. Hear from Pam Pietruszewski (RASAI Clinical Lead, Integrated Health Consultant, National Council for Behavioral Health) and Aaron Williams (Director of Training & Technical Assistance for Substance Abuse, SAMHSA-HRSA Center for Integrated Health Solutions, National Council for Behavioral Health) as they talk about how you can position your SBIRT team for success & sustainability.

The Power of Words

Check out and share the National Council’s version of an “addiction-ary” in this infographic, and challenge yourself and your colleagues to employ the language under the “Say This” column when discussing addictions.
INSIGHTS FROM THE FIELD
Bringing SBIRT to Schools

Part of the reason behind SBIRT’s success is its adaptability for use in a variety of settings, including high-risk schools. The first step in ensuring voluntary SBIRT implementation is to effectively promote the practice among providers. Check out this article about the messaging strategies you can use to effectively communicate the early identification and intervention benefits of SBIRT to program directors and clinicians at school-based health centers (SBHCs).

Coming to a Consensus on an “Addiction-ary”

As behavioral health care staff, we can all acknowledge the impact of words and language when working with individuals with mental health conditions. However, the movement towards destigmatizing these conditions won’t be fully successful without an agreement upon which terms we should and should not use. In this article, the authors expand upon this notion and offer recommendations for an “addiction-ary” that will help reduce stigma and discriminatory public health and social policies.

RASAI REFLECTION
Keeping Alcohol in Focus to Reduce Youth Substance Use

By Alexa Eggleston

Alcohol is the most commonly used drug among youth in the United States. Excessive drinking is responsible for more than 4,300 deaths among underage youth each year and cost the U.S. $24 billion annually. In addition to the thousands of deaths each year that result from underage drinking, approximately 200,000 young people visit an emergency room for alcohol related injuries.

FDA Takes Action on Tobacco

In a historic ruling earlier this month, the U.S. Food and Drug Administration finalized a rule extending its oversight on all tobacco and other nicotine products - including e-cigarettes, which are particularly popular with younger Americans. This new step in consumer protection allows the FDA to have a greater hand in combating the public health ramifications of tobacco and nicotine use among youth and aid in the fight for a new tobacco-free generation.

From SBIRT to Tobacco & Cancer Control

We’re thrilled to congratulate fellow RASAI sites
Despite these staggering numbers, 2015 marked the lowest levels for alcohol use recorded by government data among high school youth. This strongly contradicts the common refrains often heard that “all teenagers drink,” or “it is a harmless rite of passage.” Addressing this misperception is important because otherwise we run the risk of further perpetuating beliefs among young people that underage and binge drinking are the expectation rather than the exception...Read more here.

Alexa Eggleston is a Senior Program Officer with the Conrad N. Hilton Foundation where she leads the implementation of the Foundation’s youth substance use prevention and early intervention initiative. Previously, she served for three years as Substance Abuse Program Director with the Council of State Governments Justice Center in Bethesda, MD where she was responsible for advising governmental and non-governmental agencies on developing and implementing substance abuse treatment and other rehabilitative services for individuals in the criminal justice system. Eggleston also worked as Director of Public Policy for the National Council for Behavioral Health and the Director of National Policy for the Legal Action Center.

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Pacific Clinics (CA) and The Center for Counseling and Consultation (KS) on their acceptance into the 2016 Community Behavioral Health Organization (CBHO) Tobacco & Cancer Control Community of Practice (CoP)! Made possible by the CDC-funded National Behavioral Health Network for Tobacco and Cancer Control, the 2016 CoP is a 7-month initiative where participating CBHOs will gain access to organizational change experts and educational materials to help them develop and implement evidence-based tobacco and cancer control and prevention practices among populations with mental illnesses and substance use disorders. In June, the participating organizations will convene in Denver, Colorado to develop action plans that will be used to track and monitor their progress towards meeting their tobacco & cancer control practice goals.

"May your choices reflect your hopes, not your fears."
—Nelson Mandela