



From the IIMHL and IIDL Update List

Welcome to this bi-monthly edition of Update for 15 October 2016.

IIMHL and IIDL aim to improve client outcomes through leadership development in the mental health, addiction and disability sectors.

Update allows the rapid transfer of new knowledge through sharing information about upcoming Leadership Exchanges, as well as key national documents, training and webinars.

Please feel free to share this e-bulletin with others and we would be delighted if you would join us on Facebook.

IIMHL / IIDL Leadership Exchange 2017

Theme: **Contributing Lives, Thriving Communities**

27th February to 3rd March 2017

Registration and Match Selection Open

- To register: <http://www.iimhl.com/iimhl-leadership-exchange-2017-sydney#Register>
- To select an IIMHL match: <http://www1.iimhl.com/Meetings/Themes.asp>
- To select an IIMHL or IIDL match: <http://www.iimhl.com/iimhl-leadership-exchange-2017-sydney#Theme>
- To view the **DRAFT AGENDA** for the Combined Meeting IIMHL and IIDL: http://www.iimhl.com/files/docs/2017_Draft_Agenda.pdf

Available for downloading and sharing with your networks are two flyers that describe the IIMHL and IIDL Leadership Exchange - Leadership Matches and Combined Meeting. Please share widely!

[2017 IIMHL Leadership Exchange Announcement](#)

[2017 IIDL Leadership Exchange Announcement](#)

Each country has an allocation of places, so waiting lists may start if the allocation is reached early.

In this issue:

- **IIMHL Feature Article - USA**
 - [Approaches in Implementing the Mental Health Parity and Addiction Equity Act: Best Practices from the States](#)

- **Other IIMHL Articles of Interest - USA**
 - [House Passes Mental Health First Aid Act](#)
 - [Clinical Practice Guideline for the Management of Substance Use Disorders](#)
 - [Using a Brain Science-Infused Lens in Policy Development Achieving healthier outcomes for children and families](#)
 - [Nationally Certified Peer Specialist Core Competencies](#)
 - [Adverse Childhood Experiences in Maine II: Knowledge, Action, and Future Directions, 2016](#)
 - [State Estimates of Past Year Serious Thoughts of Suicide Among Young Adults: 2013 and 2014](#)
 - [Crisis to Recovery: National Council Magazine](#)
 - [Combatting the Heroin and Opioid Crisis: Heroin and Opioid Task Force Report June 9, 2016](#)
 - [STRYVE \(Striving to Reduce Youth Violence Everywhere\)](#)

- **IIDL Feature Articles - USA**
 - [Supported Decision-Making: An Agenda for Action](#)

IIMHL Feature - USA

Approaches in Implementing the Mental Health Parity and Addiction Equity Act: Best Practices from the States

SAMHSA, 2016

This report identifies best practices used by states in implementing and monitoring compliance with the Paul Wellstone and Pete Domenici Mental Health Parity and Addiction Equity Act of 2008 (MHPAEA or “parity”).

Pete Domenici Mental Health Parity and Addiction Equity Act of 2008 (MHPAEA or “parity”).

California, Connecticut, Maryland, Massachusetts, New York, Oregon, and Rhode Island were interviewed about their experiences with implementing the parity law. Phone interviews were conducted with representatives from the state offices tasked with oversight of insurance. Questions covered four areas: (1) parity implementation processes, (2) collaborations with other organizations, (3) tools for understanding and monitoring compliance, and (4) recommendations for other states. The discussions covered the experiences of personnel involved in the day-to-day oversight related to parity implementation and compliance; reporting by health insurance carriers, surveying, and auditing; data collection and interpretation of the law; and consumer rights protection.

To read the article in full:

<http://store.samhsa.gov/shin/content//SMA16-4983/SMA16-4983.pdf>

Other IIMHL Articles of Interest - USA

House Passes Mental Health First Aid Act

The National Council for Behavioral Health

IIMHL wishes to congratulate the National Council for Behavioral Health and the states of Maryland and Missouri for their promotion of MHFA. When IIMHL introduced MHFA to the National Council for Behavioral Health we never thought that this program would become such a successful part of the US mental health system. A special congratulations to all of the trainers and organizations who use the approach.



On Monday, the House chamber unanimously approved the [House Energy and Commerce Committee's version](#) of [H.R. 1877](#), the Mental Health First Aid Act of 2015. This legislation authorizes grants for mental health and substance use awareness training to law enforcement, first responders, teachers, and other individuals that work with youth. The National Council issued the [following statement](#) on this important action.

"The National Council for Behavioral Health appreciates Congresswomen Lynn Jenkins (R-KS) and Doris Matsui's (D-CA) leadership on the Mental Health First Aid Act (H.R. 1877) and thanks Speaker Paul Ryan (R-WI) for bringing it to the floor.

Police have become the de facto first responders to mental health crises. The eight-hour Mental Health First Aid training provides officers with tools to help de-escalate incidents and avoid tragic outcomes. Officers learn how to assess a situation, intervene properly and help someone find appropriate care. The House is voting on the bipartisan legislation today, which will award grants to train individuals, including police officers, to accomplish safe de-escalation of crisis situations, recognize the signs and symptoms of mental illness and encourage timely referral to mental health services.

<http://www.thenationalcouncil.org/capitol-connector/2016/09/house-passes-mental-health-first-aid-act/>

Clinical Practice Guideline for the Management of Substance Use Disorders

Department of Veterans Affairs and Department of Defense, December 2015

This 169-page report is intended to assist healthcare providers in all aspects of patient care, including, but not limited to, diagnosis, treatment, and follow-up. The system-wide goal of evidence-based guidelines is to improve the patient's health and wellbeing by guiding health providers who are taking care of patients with SUD along the management pathways that are supported by evidence.

The expected outcome of successful implementation of this guideline is to:

- Assess the patient's condition and determine in collaboration with the patient the best treatment method
- Optimize each individual's recovery to decrease or eliminate consumption, improve health and wellness, live a self-directed life, and strive to reach his or her full potential
- Minimize preventable complications and morbidity
- Emphasize the use of patient-centered care

<http://www.healthquality.va.gov/guidelines/MH/sud/VADoDSUDCPGRevised22216.pdf>

Using a Brain Science-Infused Lens in Policy Development Achieving healthier outcomes for children and families

Change in Mind Initiative A partnership between the Alliance for Strong Families and Communities and the Palix Foundation with strategic investment from the Robert Wood Johnson Foundation, 2016

The healthy development of all children and youth is essential for a thriving and prosperous society. We have learned critical new information in the last decade about the most effective ways to foster the health and well-being of families today and for generations to come. Brain science research has uncovered the basic physiological processes that support healthy development for infants and young children.

http://alliance1.org/sites/default/files/PDF/designcim_science_infused_policy.finalsept272016.pdf

Nationally Certified Peer Specialist Core Competencies

Mental Health America, February 2016

Mental Health America has recently released a draft of the 'Nationally Certified Peer Specialist Core Competencies' for public comment.

<http://flcertificationboard.org/assets/uploads/MHA-Nationaly-Certified-Peer-Specialist-Draft-Core-Competencies-for-Public-Comment.pdf>

Adverse Childhood Experiences in Maine II: Knowledge, Action, and Future Directions, 2016

Sue Mackey Andrews, MS, Leslie A. Forstadt, PhD, Erik Hood, MS, & Mark Rains, PhD, Maine

This report is produced for the Maine Resilience Building Network (MRBN), a statewide network founded in 2012. Participants (n = 352) shared their understanding of Adverse Childhood Experiences (ACEs) and the ACE Study. They shared how they work with ACEs and resilience professionally, and levels of intervention throughout the state. The results of the study were used to determine needs related to ACEs education and training.

As a result of recommendations from the study, the MRBN was founded, and several training and educational resources were developed to educate about ACEs. The

MRBN is a statewide network of individuals working in a variety of settings and the goals of the network are to:

1. Engage in broad conversations about ACEs and resilience
2. Increase participation in the MRBN
3. Become a clearinghouse for ACEs information and educational resources
4. Seek funding to support projects at the local level
5. Collect additional data

<http://maineaces.org/wp/wp-content/uploads/2016/04/2016-Report.pdf>

State Estimates of Past Year Serious Thoughts of Suicide Among Young Adults: 2013 and 2014
SAMHSA, 2016

- Based on combined 2013–2014 National Surveys on Drug Use and Health, 2.6 million young adults aged 18 to 25 in the United States had serious thoughts of suicide in the past year.
- Based on combined 2013–2014 National Surveys on Drug Use and Health, about 1 in 13 young adults had suicidal thoughts in the past year.
- Past year serious thoughts of suicide among young adults ranged from 6.2 percent in Texas to 10.3 percent in New Hampshire.
- The prevalence of past year serious thoughts of suicide increased in New Hampshire (when comparing 2013–2014 estimates with 2012–2013 estimates) but remained unchanged in 49 states and the District of Columbia.

http://www.samhsa.gov/data/sites/default/files/report_2387/ShortReport-2387.pdf

Crisis to Recovery: National Council Magazine • 2016, ISSUE 1

The National Council for Behavioural Health, 2016

This magazine is dedicated to crisis service innovations and best practice. It also includes some information on child & youth services. A key focus is the need for peer solutions in the future.

<http://www.thenationalcouncil.org/consulting-best-practices/magazine/>

Combatting the Heroin and Opioid Crisis: Heroin and Opioid Task Force Report June 9, 2016

New York State

This report outlines recommendations for state actions to tackle the public health crisis of heroin and opioid addiction that is spreading across New York State.

The Task Force has focused its work across four main areas: Prevention, Treatment, Recovery, and Enforcement to address the root causes of the crisis as well as effective rehabilitation for the individuals and families who need help.

https://www.governor.ny.gov/sites/governor.ny.gov/files/atoms/files/HeroinTaskForceReport_2.pdf

STRYVE (Striving to Reduce Youth Violence Everywhere)

CDC, 2016

This resource was developed by the Centers for Disease Control and Prevention (CDC) to help you customize your youth violence prevention work and track your efforts. Videos of other communities working to prevent youth violence are included to provide real-life context for many of the main points presented throughout. It is part of the CDC's "Veto Violence" work.

<http://vetoviolenecdc.gov/apps/stryve/>

IIDL Feature - USA

Supported Decision-Making: An Agenda for Action

January 2014 | Cathy Ficker Terrill | Tina Campanella | Kerri Melda

Historically, people with cognitive disabilities have been placed under legal guardianship regimes, losing the right to make their own choices such as where to live and whether to work, marry, or receive health care. Supported Decision-Making (SDM), by contrast, offers an opportunity for many adults with disabilities to make their own decisions, consistent with fundamental human and legal rights, and an emerging international consensus. This article looks at how we might collectively build the agenda to advance Supported Decision making in the lives of vulnerable people.

<https://www.c-g-l.org/app/webroot/files/DOCUMENTS/Supported%20Decision%20Making-Jan2015.pdf>

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Join IIMHL / IIDL

Any leader in mental health, addiction and disability services can join IIMHL or IIDL free by using this link: <http://www1.iimhl.com/Join.asp>

Please note: We try to find articles, new policies, research that has been released or opinion pieces we think are interesting to reflect on. Sometimes those who receive these may feel is not accurate either for its use of data or not aligned with their views. IIMHL does not endorse any article it sends out as we try to rapidly share information.

