



*E-News This Week  
February 10, 2014*

A personal note from Linda McKinnon, CEO.



*Linda Rosenberg, President and CEO of the National Council, in her blog wrote that days after Philip Seymour Hoffman was found dead in his apartment from a heroin overdose the news was no longer trending on Twitter. Hollywood paid its tributes and everyone was moving on.*

*Hoffman's is just the latest in a string of celebrity overdose deaths, but like other crisis we are not experiencing outrage. Those of us in the treatment field recognize that this is another American health care crisis – substance use disorders.*

*Vermont Governor Peter Shulman recently reported in his recent State of the State address that heroin is a public health problem that needs a public health solution: treatment. Hoffman's own story is revealing. He was in recovery for over two decades, but like others, he relapsed. Addiction is a chronic disease but only about 1 in 10 people with addiction disorders receive any treatment at all. For the ones that do receive treatment it is often short term without ongoing, follow-up care.*

*The good news is there are effective treatments for addictions which include medication assisted treatment that is particularly effective when paired with counseling and support. We need to focus and support the growing movement of people in recovery and their families, including those who have lost loved ones, to drive policy and practice change that focuses on long term solutions in local communities.*

*CFBHN works diligently with our substance abuse provider organizations to bring the best treatment for substance abuse addictive disorders to the communities we serve. Most recently we implemented a targeted program to outreach to pregnant and post-partum, substance abusing women who are in need of services and qualify for state funding. This will be lifesaving services for moms and their babies.*

*As always this week's E-News features timely information on special events that recognize people and issues we are passionate about. Here's hoping your week goes well!*

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## **HHS Strengthens Community Living Options**

**Both older Americans and people with disabilities will benefit**



The Centers for Medicare & Medicaid Services (CMS) issued a final rule today to ensure that Medicaid's home and community-based services programs provide full access to the benefits of community living and offer services in the most integrated settings. The rule, as part of the Affordable Care Act, supports the Department of Health and Human Services' Community Living Initiative. The initiative was launched in 2009 to develop and implement innovative strategies to increase opportunities for Americans with disabilities and older adults to enjoy meaningful community living.

Under the final rule, Medicaid programs will support home and community-based settings that serve as an

alternative to institutional care and that take into account the quality of individuals' experiences. The final rule includes a transitional period for states to ensure that their programs meet the home and community-based services settings requirements. Technical assistance will also be available for states.

"People with disabilities and older adults have a right to live, work, and participate in the greater community. HHS, through its Community Living Initiative, has been expanding and improving the community services necessary to make this a reality," said HHS Secretary Kathleen Sebelius. "Today's announcement will help ensure that all people participating in Medicaid home and community-based services programs have full access to the benefits of community living."

In addition to defining home and community-based settings, the final rule implements the Section 1915(i) home and community-based services State Plan option. This includes new flexibility provided by the Affordable Care Act that gives states additional options for expanding home and community-based services and to target services to specific populations. It also amends the 1915(c) home and community-based services waiver program to add new person-centered planning requirements, allow states to combine multiple target populations in one waiver, and streamlines waiver administration.

For more information about the final rule, please visit: [http://cms.gov/Newsroom/Search-Results/index.html?q=&filter=Fact Sheets](http://cms.gov/Newsroom/Search-Results/index.html?q=&filter=Fact+Sheets)

For more information regarding the Home and Community-Based Services available under Medicaid, please visit: <http://www.medicaid.gov/HCBS>

For more information regarding the Community Living Initiative, please visit: <http://www.hhs.gov/od/community/index.html>

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## Stronger, Safer, Smarter Justice

[Protecting Florida from Sexually Violent Predators day long workshop](#)  
February 21, Hilton Orlando/Altamont Springs

- Discover ways to educate and inform policy makers on better policies to protect the public and be part of the discussion on what Florida should do with sexually violent predators.
- Hear what state leaders and advocates across the state are already doing and proposing to do to keep the public safe.



Featured speaker is Kristin Kanner, Esq., Director of the state's Sexually Violent Predator Program who has more than 20 years' experience as a prosecutor and as leader of the 17<sup>th</sup> Judicial Circuit Sexually Violent Predator Unit for 10 years. She will be joined by Senator Rob Bradley who is currently serving as a Florida Senator, Lauren Book, founder of Lauren's Kids Foundation and a survivor of sexual abuse at the hands of her childhood nanny, Eric Imhof a member of the Multidisciplinary DCF Team who decides which inmates go to the Florida Civil Commitment Center and Robin J. Wilson, [Click here to register](#). \$99 through Feb 14 and includes all materials, lunch and breaks. [Click here](#) to reserve your hotel room in the room block at the rate of \$115/night

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## Free All Day Training on "Making It Work: Implementing Seeking Safety"

[DCF/FADAA workshop in Dania Beach offers 5.5 CEU's](#)

This workshop will provide an opportunity to address, in-depth, how *Seeking Safety* is applied in clinical settings. *Seeking Safety* is a 25-topic integrated psychotherapy for substance abuse and trauma/posttraumatic stress disorder. In the workshop, specific treatment interventions will be demonstrated and treatment challenges will be discussed. Also, general principles relevant for this population regardless of treatment model will be discussed, including dissociation, self-injury, behavioral contracts, effective cognitive strategies, and developing trauma-informed treatment. The workshop will be highly clinically-oriented and offer opportunity to role-play client scenarios and discuss implementation issues that have arisen in using the model. *For more information and to register go to* <http://fadaa.org/workshopInformation.php?id=47>

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Join us for this important educational opportunity:

**2014 Addiction Health Summit**  
February 27 - March 1, 2014 | Hilton Orlando

Addiction Health Summit



The Florida chapter of the American Society of Addiction Medicine (FSAM) and Florida Medical Professionals Group (FMPG) welcome UF Health, the UF Drug Policy Institute and the Florida Alcohol and Drug Abuse Association (FADAA) as title partners, kicking off the 1st Addiction Health Summit. The Summit is an innovative offering of education (medicine, treatment and public policy), powerful networking opportunities and a celebration of recovery!

For more information and to register go to <http://addictionhealthsummit.com/>.

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## Local Community Based Care Organization Reports Progress

Lorita Shirley, Chief, emphasizes positive community outcomes



[EckerdCBC.org](http://EckerdCBC.org)

Last year Eckerd partnered with the Casey Family Programs to launch a "permanency round table" initiative in Hillsborough County which called for an "out of the box" review of the permanency plan and system barriers that prevent the most vulnerable of the 2,800 children that are in the foster care system from leaving in a timely manner. This initiative brought a wide range of community partners together to focus on results.

On average approximately 120 children exit the foster care system monthly through reunification with a parent, closure to permanent guardianship, or adoption. Since the launch of the Permanency Round Table Initiative last August community stakeholders worked together on some of the most complex cases involving children with the lowest probability for reunification. They spent countless hours combing through case records, interviewing case managers and coming up with creative ways to ensure no child was forgotten. The result- an additional 27 children (with a low probability for reunification) were given a second chance at life when they were finally reunified with their parents or an extended family member. But that's not all - an additional 88 children have updated permanency plans that will ensure they are connected to a family soon. For more information go to their website at [www.eckerdcbc.org](http://www.eckerdcbc.org). (Eckerd serves children and families in Hillsborough, Pinellas and Pasco counties.)

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## Drug House Odyssey 2014 – A Lee County Prevention Event

March 11-13 for school field trips and 6-8:00 pm March 12 open to the general public

Drug House Odyssey 2014 will graphically show the potential deadly consequences of drinking, drug use, and driving. Located at Cape Christian Fellowship, 2110 Chiquita Boulevard South in Cape Coral, this real-life play follows a quartet of high school students from a casual encounter with drinking and drugs, through the emergency room, arrest, and courtroom. Drug House Odyssey is even more compelling, since it uses actual law enforcement, fire and rescue, and medical professionals, including police officers, fire fighters, trauma doctors, State Attorney, EMS responders and chaplains, re-enacting their roles in everyday life. Over the course of the three days it is expected that about 2,500 people will attend the event which is free to the public. For more information contact Deborah Comella at [executivedir@drugfreeswfl.org](mailto:executivedir@drugfreeswfl.org)

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## Florida's Largest Youth Parade at Edison Festival of Light

Showcased the creativity and talent of hundreds of children and their families February 9



The Lee County Coalition for a Drug-Free Southwest Florida participated in the Edison Festival of Light Junior Parade in Fort Myers, FL on February 9, 2014. Florida's largest youth parade showcases the creativity and talents of hundreds of Southwest

Florida children and their families. Over 100 units including floats, marching bands, dancers, street performers, clowns and dignitaries parade their way around the Downtown river District. The annual event has been taking place in Southwest Florida since the 1940's. With participants including representatives from SIYA (Supporting Independent Young Adults), Mothers Against Drunk Driving, the Cape Coral High School SADD Club, SalusCare, Street Chicks in Recovery, and individuals supporting prevention including Councilman Lenny Nesta, City of Cape Coral, the unit lived up to its "hash tag" #thisiswhatacoalitionlookslike.



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## Upcoming Webinars

Promoting Positive Youth Development, Health & Well-Being through Life Skills Training – 2/21/14 @ 10:00am ET <https://fadaaevents.webex.com/fadaaevents/onstage/g.php?t=a&d=663970547>

Making it Work: Implementing Seeking Safety – 3/11/2014 @ 9:00am ET Register Now at <https://event.on24.com/eventRegistration/EventLobbyServlet?target=registration.jsp&eventid=720975&sessionid=1&key=887B4D25409FE47D89EF05FD518F6C23&partnerref=apemail2&sourcepage=register>



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## Lorita Shirley Presents to Florida House Healthy Families Committee

[Community Based Care Leader does outstanding job](#)

Kurt Kelly, CEO, Florida Coalition for Children reports on her outstanding job presenting about what the community-based care lead and provider agencies are doing in the area of human trafficking. Her participation brought many informed questions and great dialogue around this issue, including on how we in the child welfare community can continue our involvement. You can watch the testimony [here](#)

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## 27<sup>th</sup> Annual USF Children's Mental Health Research & Policy Conference

[Planned for March 2-5 in Tampa](#)



The 27th Annual Children's Mental Health Research & Policy Conference will be held **March 2 – 5, 2014** at the newly renovated Hilton Tampa Downtown hotel. Since 1988, Department of Child and Family Studies at the University of South Florida has been a leader in promoting the expansion of the research base essential to improved service systems for children and youth with mental health challenges and their families.

Dr. Thomas Bornemann has been confirmed as the Monday afternoon speaker for the conference. Dr. Bornemann has served as director of the Carter Centers Mental Health Program and has spent his entire career in public mental health working in all aspects including: clinical practice, research, research management, policy development, and administration at the national level. Dr. Bornemann's presentation will profile the work of the Carter Center, with a special focus on important issues facing children's mental health policy.

Dr. David Satcher will be the featured speaker for the opening plenary session. This presentation titled Promoting and Protecting the Mental Health of Children- A Collaborative Approach will begin by discussing the history, mission, and programs of the Satcher Health Leadership Institute and their relevance to promoting and protecting mental health, especially of children. This will include discussion of the key ingredients of successful collaborations, as taught in the leadership institute at the Morehouse School of Medicine. Dr. Satcher will discuss opportunities to reduce stigma, to enhance early diagnosis and treatment, to allow early access to care, and to improve academic performance. The presentation will conclude by looking at the special needs of urban communities for collaboration and the model that has been most successful in taking advantage of this type of consortium. For more information and to register go to <http://www.cmhconference.com/>.

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## Data Spotlight



- .Addiction to drugs and alcohol affect **millions** of people and their families every year
- They often go undiagnosed by healthcare professionals – only **1 in 10** get treatment
- **1 in 11** past year illicit drug users had serious thoughts of suicide
- **21%** of veterans in substance abuse treatment were homeless
- **18%** of pregnant women drink alcohol during early pregnancy
- Results in an estimated combined healthcare cost, lost productivity and crime of **\$365 billion** in America

*\*SAMHSA information on data, outcomes and quality*

## SAMHSA-HRSA Center Brings Integrated Care To the Forefront

Stay up to date on the new(est) approaches to care at [www.integration.samhsa.gov](http://www.integration.samhsa.gov)



[Please note: many of the following links require a membership or payment to view the entire article and that the following references are for informational purposes only and do not constitute endorsement or recommendation by SAMHSA or HRSA.]

**.A Behavioral Weight-Loss Intervention in Persons with Serious Mental Illness**, New England Journal of Medicine, 2013. A **behavioral weight-loss intervention significantly reduced weight** over a period of 18 months in overweight and obese adults with serious mental illness. Given the epidemic of obesity and weight-related disease among persons with serious mental illness, the findings support implementation of targeted behavioral weight-loss interventions in this high-risk population.

**Effect of a Multipayer Patient-Centered Medical Home on Health Care Utilization and Quality: The Rhode Island Chronic Care Sustainability Initiative Pilot Program**, JAMA Internal Medicine, 2013. *Access via Payment or Membership.* After 2 years, a pilot program of a patient-centered medical home was associated with substantial **improvements in medical home recognition scores and a significant reduction in ambulatory care sensitive emergency department visits**. Although not significant, this study also found downward trends in emergency department visits and inpatient admissions.

**Stigma among health professionals towards patients with substance use disorders and its consequences for healthcare delivery: Systematic review**, Drug and Alcohol Dependence, 2013. *Access to full text via payment or membership.* This review indicates that **negative attitudes towards individuals with substance use disorders are common among health professionals** and contribute to suboptimal healthcare. Few studies have evaluated the consequences of health professionals' negative attitudes towards people with substance use disorders.

**Integrating behavioral and physical health care in the real world: early lessons from advancing care together**, Journal of the American Board of Family Medicine. 2013. A study of 11 practices describes the strategies these providers used or are developing to address challenges in **the process of integrating primary and behavioral healthcare** related to workflow, access, leadership, tracking data, and cultural change.

**CO-OCCURRING PHYSICAL AND BEHAVIORAL HEALTH CONDITIONS Comorbidities and Mortality in Bipolar Disorder: A Swedish National Cohort Study**, JAMA Psychiatry, 2013. *Access via Payment or Membership.* People with bipolar disorder die prematurely from multiple causes, including cardiovascular disease, diabetes, COPD, influenza or pneumonia, unintentional injuries, and suicide. However, people with more timely medical diagnosis approached mortality closer to that of the general population, suggesting that **better provision of primary medical care may effectively reduce premature mortality among persons with bipolar disorder**.

**Increased risk of coronary heart disease among individuals reporting adverse impact of stress on their health: the Whitehall II prospective cohort study**. European Heart Journal, 2013. Researchers examined whether individuals who report that stress adversely affects their health are at increased risk of coronary heart disease compared with those who report that stress has no adverse health impact. The study found that **the perception that stress affects health**, different from perceived stress levels, was associated with an increased risk of coronary heart disease, and recommend controlled studies to explore this association further.

**Mental health status and gender as risk factors for onset of physical illness over 10 years**, Journal of Epidemiology and Community Health, 2013. *Access via Payment or Membership.* This study examined gender differences in the onset of physical illness in a cohort of respondents who met criteria for mental illness compared with a control group without mental health concerns. Findings suggest that **gender-specific treatment and prevention practices can be developed to target those at higher risk of multiple health conditions**.

**Randomized controlled trial of a behavioral intervention targeting symptoms and physical activity in multiple sclerosis**, Multiple Sclerosis Journal, 2013. *Access via Payment or Membership* Results of this 6-month randomized controlled trial support **behavioral interventions targeting lifestyle physical activity as an alternative approach for managing symptoms in MS**. The study examined the efficacy of an online behavioral intervention for improving outcomes of fatigue, depression, anxiety, pain, sleep quality, and quality of life in 82 ambulatory persons with multiple sclerosis.

**The gap in life expectancy from preventable physical illness in psychiatric patients in Western Australia: retrospective analysis of population based registers**, British Medical Journal, 2013. Despite knowledge about excess mortality in people with mental illness, the gap in their life expectancy compared with the general population has widened since 1985. With most excess deaths being due to physical health conditions, **public efforts should be directed towards improving physical health to reduce mortality in people with mental illness**, in addition to ongoing efforts to prevent suicide.

## TREATING

## MENTAL

## ILLNESS

**Treatment for Depression After Unsatisfactory Response to SSRIs**, Agency for Healthcare Research and Quality, 2012. A comparative effectiveness review was undertaken to evaluate **treatment strategies in patients who failed to respond to selective serotonin reuptake inhibitors (SSRIs)** as first-line treatment. The review evaluated the efficacy of monotherapy approaches (dose escalation, increased duration, or switch) with the efficacy of combined therapies.

## SUBSTANCE USE AND TREATMENT

**Brief Intervention and Social Work: A Primer for Practice and Policy**, Social Work in Public Health, 2013. This review outlines the case for **involving social workers in screening and brief intervention** for individuals who are in need of help for alcohol use concerns. Challenges that impede screening and brief intervention include lack of reimbursement for the service and the potential denial of payment for care of those who are intoxicated at the time of their injury.

**Care for hospitalized patients with unhealthy alcohol use: a narrative review**, Addiction Science & Clinical Practice, 2013. This review suggests **hospitals conduct screening for alcohol use**, referral to outpatient addiction treatment if available, and consideration of medications to prevent a return to heavy drinking, and explicit follow-up on alcohol use in the ambulatory medical setting.

**Chronic Care Management for Dependence on Alcohol and Other Drugs: The AHEAD Randomized Trial**, Journal of the American Medical Association, 2013. *Access to full text via payment or membership* This clinical trial looked at whether **chronic care management for persons with alcohol and other drug dependence** is effective. The trial compared individuals who received chronic care management with individuals who had a primary care appointment but no chronic care management. The trial did not find a significant difference in self-reported abstinence over 12 months between the two groups.

**Epigenetics—A New Frontier for Alcohol Research**, National Institute on Alcohol Abuse and Alcoholism, 2013. Research suggests that exposure to drugs and other chemicals, including alcohol, directly affects epigenetics, leading to abnormal expression or silencing of essential genes. These changes influence a variety of cells and organ systems throughout the body. This report suggests that researchers explore the exact nature of **alcohol's interactions with epigenetics**, to ultimately design better medications to treat or alleviate a wide range of alcohol-related disorders

**Comorbidity of Severe Psychotic Disorders with Measures of Substance Use**, JAMA Psychiatry, 2014. The largest assessment of substance use among individuals with severe mental illness, found that **rates of smoking, drinking and drug use are significantly higher among those who have severe mental illnesses** than among the general population.

## TOBACCO CESSATION

**Patterns of tobacco-related mortality among individuals diagnosed with schizophrenia, bipolar disorder, or depression**, Journal of Psychiatric Research, 2013. *Access full text via Payment or Membership*. Individuals with psychiatric conditions smoke at rates approximately 2–4 times greater than the general population, yet surprisingly little evidence exists to assess of the full range of tobacco-related mortality in such populations. This study aims to provide **mortality estimates for conditions related to tobacco use** among individuals hospitalized with a primary psychiatric diagnosis in California from 1990 to 2005.

**Smoking Rate among Adults with Serious Psychological Distress Remains High**, Center for Behavioral Health Statistics and Quality, 2013. Cigarette use continues to be the leading preventable cause of death in the United States. Recent data from the National Survey on Drug Use and Health (NSDUH) have shown that **the smoking rate is much higher among persons with mental illness than among those who do not have mental illness**. NSDUH data also show that serious psychological distress (SPD) is associated with serious mental illness (SMI)

**Tobacco Use and Its Treatment Among Young People in Mental Health Settings: A Qualitative Analysis**, Nicotine & Tobacco Research, 2013. *Access full text via Payment or Membership* Youth and providers believe that clinicians can do more to address tobacco use. However, there is an apparent **disconnect between provider and youth recommended strategies for supporting cessation**. This review suggests that integrated care settings offer an approach to tobacco cessation which may more effectively reach youth.

**Cigarette Smoking and Mental Illness: A Study of Nicotine Withdrawal**, American Journal of Public Health, 2013. *Access full text via payment or membership*. Mental illness was associated with a substantially greater likelihood of nicotine withdrawal syndrome; approximately **44% of nicotine withdrawal syndrome diagnoses were attributable to mental illness**. Smokers with mental illness were less likely to be successful in their quit attempts.

## ADDRESSING HEALTH DISPARITIES

**Disparities in Adequate Mental Health Care for Past-Year Major Depressive Episodes Among Caucasian and Hispanic Youths**, Psychiatry Online, 2013. This study found **racial and ethnic disparities in receiving adequate mental health care** among Caucasian and Hispanic youths who experienced major depressive episodes in the past year. As more adolescents of diverse racial and ethnic backgrounds seek access to mental health treatment services, additional study is needed about the degree to which treatment should be tailored to engage and retain racial and ethnic groups

'Double jeopardy' measure suggests blacks and Hispanics face more severe disparities than previously indicated, Health Affairs, 2013. *Full text access via Payment or Membership.* The researchers offer measures to **estimate the number of years whites, blacks, and Hispanics can expect to live in insurance "double jeopardy"**: being uninsured while also in lesser health. Compared to whites, Hispanics and blacks are more likely not only to be uninsured at any point throughout their lives, but also to spend more years uninsured and spend more of those years at high risk of needing medical care

**Race/Ethnicity and Geographic Access to Medicaid Substance Use Disorder Treatment Facilities in the United States**, JAMA Psychiatry, 2013. *Full text access via Payment or Membership.* Approximately **60% of US counties have at least one outpatient Substance Use Disorder facility that accepts Medicaid**, although this rate is lower in many Southern and Midwestern states. Counties with a higher percentage of black, rural, and/or uninsured residents are less likely to have one of these facilities.

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## And In Other News – Upcoming Conferences & Local Art Sale



### [5th International Conference on Adoption and Culture](#)

March 27-30, 2014  
Tallahassee, FL

### [32nd Annual Protecting Our Children National American Indian Conference on Child Abuse and Neglect](#)

April 13-16, 2014  
Fort Lauderdale, FL

### [19th National Conference on Child Abuse and Neglect](#)

April 30-May 2, 2014  
New Orleans, LA

### [National Council for Behavioral Health Conference](#)

May 5-7, 2014  
Washington, DC



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