In collaboration with the Centers for Disease Control and Prevention’s Office for State, Tribal, Local and Territorial Support (OSTLTS), the National Council for Behavioral Health (National Council) is pleased to announce the third annual **Behavioral Health Training and Technical Assistance for State, Tribal, Territorial, and Local Health Officials Program**. Through a Request for Application process, up to forty (40) state, tribal, territorial, and local health officials will be selected to participate in the third cohort of this 8-month initiative. Selected health officials will gain direct access to behavioral health (mental health and substance use disorders) training and technical assistance to enhance and/or initiate behavioral health efforts within their jurisdictions. Participating health officials will also gain knowledge and skills on public health’s role in a variety of pertinent behavioral health topics, including but not limited to:

- Workforce Development: Building behavioral health capacity among the public health workforce
- Role of Behavioral Health Systems within a Public Health Model
- Advancing cross-state agency partnerships to address challenges
- Future Trends in Behavioral Health (Mental Health and Substance Use Disorder Treatment)
- Collaborative Care: Evidence-based treatment for behavioral health conditions in primary care
- Why Integration? The Impact of Integrating Behavioral Health and Primary Care
- Building a Trauma Informed Nation: Moving the Conversation into Action
- Adopting Technology: Trends and Landscape of Behavioral Health Information Technologies
- Financial and operational functions of Community Behavioral Health Organizations (CBHOs)
- Types of coverage (e.g., state & federal exchanges, Medicare, Medicaid, prescription benefits, public assistance, transportation assistance)
- Resources for the uninsured
- Use of epidemiological data for surveillance and appropriate delivery of services
- Behavioral Health State of the State (e.g., state payment and delivery reforms; relevant state-based behavioral health financing structures; Certified Community Behavioral Health Clinics)
- Substance Use Disorder Treatment Legislative & Policy Update: Parity Regulations & Enforcement
- Addressing the Opioid Epidemic (e.g., promoting coordinated care, early detection, and early intervention of potential drug abuse; optimizing timely access to substance use services; including Medication-Assisted Treatment; promoting quality, outcomes-driven substance use services)

Additionally, participants will have access to the following:

- Two-day in-person behavioral health training in conjunction with the National Council’s Annual Conference
- FREE Access to the National Council’s 2018 Conference, April 23-25, 2018 in Washington, DC with tailored conference programming for health officials
• Toolkit of resources that will include archived webinars, white papers and training materials
• Weekly e-digest of the latest news and innovative resources in behavioral health
• Series of webinars tailored to meet the needs identified by the health officials cohort
• Monthly conference calls to share and solicit feedback from peers related to current and proposed community behavioral health integration and partnership efforts

Program Overview

From November 2017 through June 2018, the Behavioral Health Training and Technical Assistance for State, Tribal, Territorial, and Local Health Officials program participants will participate in one (1) introductory webinar, one (1) two-day in-person training, the National Council’s Annual Conference, and gain access to additional ongoing trainings and resources. The two-day in-person training (April 21-22, 2018) will precede the National Council’s 2018 Conference from April 23-25, 2018 in Washington, DC. Program participants will also be granted the opportunity to attend the National Council Conference for FREE. *Thanks to support from the CDC, the National Council will cover travel, lodging expenses, and conference registration fees for selected program participants. In order to inform the technical assistance and resources offered throughout the program, applicants will be asked to complete a behavioral health baseline assessment as part of the application process.

Up to forty (40) state, tribal, territorial, and local health officials will be selected to participate in this program.

Program Expectations and Requirements

Participants should be available to participate in at least 80% of the following program activities:

☐ One (1) Behavioral Health Training & Technical Assistance for State, Tribal, Territorial & Local Health Officials program orientation webinar (Thursday, November 9, 2017 from 1:30 – 3:00pm ET)*
☐ Up to four (4) conference calls (optional) to network with peer health officials, hear from subject matter experts, and exchange ideas and information related to behavioral health efforts. These calls will be held monthly beginning in January 2018. Specific dates are TBD based on availability.
☐ One (1) two-day in-person training preceding the National Council’s Annual Conference in Washington, DC, April 23-25, 2018*
  o The two-day in-person training (Saturday, April 21 – Sunday, April 22, 2018) will include:
    ▪ An interactive training to provide mental health tools to public health officials;
    ▪ An intensive orientation/strategy meeting focusing on the systems, challenges and opportunities within behavioral health;
    ▪ Networking event: State, tribal, territorial, and local health officials; Behavioral health directors; and leaders from across the healthcare field.
  o FREE access to the National Council 2018 Conference, April 23-25, 2018 in Washington, DC
    ▪ Conference programming for state, tribal, territorial, and local health official program participants, including our Population Health conference track workshop sessions.
    ▪ Access to the public health “headquarters” – a space reserved exclusively for public health officials to facilitate networking and sharing amongst peers.
    ▪ Access to ground-breaking Conference speakers. Past NatCon speakers include:
      • Dr. Tom Insel, Top Neurologist and former NIMH Director
      • Vivek Murthy, former US Surgeon General
- Patrick Conway, Federal Health Care Leader
- Patrick Kennedy, Staunch Advocate
- There will also be additional topic-specific webinars made available to program participants based on state or jurisdiction-specific needs and concerns identified by health officials in the behavioral health assessment. The first topic-specific webinar is tentatively scheduled for December 6th, 2017 from 2:00 – 3:30pm ET.

*Participation in these activities is **MANDATORY**.

The estimated time commitment for participation in this program across 8 months is roughly 35-40 hours (introductory webinar, two-day in-person training, National Council Annual Conference, optional webinars and conference calls, and resource sharing). More information about the National Council’s Annual Conference is available at [https://natcon18.thenationalcouncil.org/](https://natcon18.thenationalcouncil.org/)

Travel, lodging expenses, and conference registration for the in-person training (April 21-22, 2018) and National Council Annual Conference (April 23-25, 2018) will be covered for program participants by the National Council*.

**Please NOTE:** This offer is non-transferrable, and can only be applied to ONE selected, pre-approved individual per jurisdiction. In order for the National Council to cover a participant’s travel, lodging, and conference registration expenses, attendance at the two-day preconference in-person training is **MANDATORY**.

**Applicant Eligibility**

This opportunity is open to any chief health official of a state, tribal, territorial, or local governmental public health agency. Health officials who have previously participated are not eligible to apply for program participation. Preference will be given to jurisdictions not represented in previous cohorts.

According to the Association of State and Territorial Health Officials (ASTHO), the **state health official** is the “highest level at a state public health agency,” and is sometimes referred to as a state health secretary or commissioner of health. The National Association of County & City Health Officials (NACCHO) defines **local health officials** (LHOs) as “the top executives at a local health department (LHD)” who are responsible for the overall administration of the LHD. Local health department top executives have many different titles across the United States: Director, Health Officer, Nurse Manager, Health Commissioner, and others. The top agency executive is defined as the highest ranking employee with administrative and managerial authority at the level of the LHD.

**Application Submission**

All applications are due by **8:00pm EDT on Monday, October 23rd, 2017** and must be submitted online through the following link: [https://nationalcouncil.secure-platform.com/a/solicitations/home/1087](https://nationalcouncil.secure-platform.com/a/solicitations/home/1087)

The application is expected to take an average of 10-15 minutes to complete. Selected applicants will be notified on or before November 3rd, 2017.

Questions about the application or this initiative? Contact **Margaret Jaco Manecke** at MargaretM@thenationalcouncil.org.
Behavioral Health Training & Technical Assistance for State, Tribal, Territorial & Local Health Officials
Application Questions
Submit final application online at:
https://nationalcouncil.secure-platform.com/a/solicitations/home/1087

Part I. Demographics

<table>
<thead>
<tr>
<th>State/Tribal/Territorial/Local Health Official</th>
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<tbody>
<tr>
<td>First Name and Last Name</td>
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<tr>
<td>Credentials</td>
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<tr>
<td>Title</td>
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<td>Organization/Agency</td>
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<td>Physical Address (City, State, Zip Code)</td>
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<td>Email Address</td>
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<td>Phone #</td>
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<td>Have you or someone else from your health jurisdiction participated in this program before?</td>
<td>Y/N</td>
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<tr>
<td>If yes, please indicate the participants' name and cohort.</td>
<td>Participant Name:</td>
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<td>□ Cohort 1 (2015-16)</td>
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<td>□ Cohort 2 (2016-17)</td>
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In order to garner maximum participation in this initiative, we are requesting that each applicant identify an alternate/secondary point of contact who would be able to participate in instances during which the primary applicant is unavailable. Potential secondary points of contact could include a health official’s deputy, chief of staff, health officer, etc. Please provide demographic information for your alternate point of contact below.

<table>
<thead>
<tr>
<th>State/Tribal/Territorial/Local Health Official’s Secondary Point of Contact</th>
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<tbody>
<tr>
<td>Secondary Point of Contact First &amp; Last Name</td>
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<td>Secondary Point of Contact Credentials</td>
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<td>Secondary Point of Contact Title</td>
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<td>Secondary Point of Contact Organization/Agency</td>
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<td>Secondary Point of Contact Email Address</td>
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<td>Secondary Point of Contact Phone #</td>
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Part II. Assessment
This section will help inform the agenda for the in-person behavioral health training for health officials on April 22nd, 2018. We would like to know more about what content would make this training most useful to you and your health department.

| Region I: CT, ME, MA, NH, RI, VT | Region II: NJ, NY, Puerto Rico, Virgin Islands | Region III: DE, DC, MD, PA, VA, WV | Region IV: AL, FL, GA, KY, MS, NC, SC, TN | Region V: IL, IN, MI, MN, OH, WI
| Region VI: AR, LA, NM, OK, TX | Region VII: IA, KS, MO, NE | Region VIII: CO, MT, ND, SD, UT, WY | Region IX: AZ, CA, HI, NV, & the six U.S. Associated Pacific Jurisdictions | Region X: AK, ID, OR, WA

What types of behavioral health (mental health and/or substance use disorders) treatment and supportive services are currently provided within your department’s scope of services? (this should include direct service provision, as well as via referrals to other providers)

- Mental Health Treatment
- Substance use screening
- Substance use disorder treatment
- Substance use disorder rehabilitation programs
- Social Services
- Crisis Intervention
- Inpatient services
- Mutual support groups and peer-run services
- At home through telebehavioral or home-based services
- School-based services
- Other, please specify

What are your health agency’s top priorities? (please select up to 5)

- Administration
- Chronic disease
- Improving consumer health
- Infectious disease
- All-hazards preparedness and response
- Health data
- Environmental protection
- Quality of health services
- Injury prevention
- Health laboratory
- Vital Statistics
- Mental Health
- Substance Use/Abuse
- Technology
- Other, please specify

What challenges or barriers does your agency face regarding providing mental health and/or substance use disorder treatment services? (200 word limit)
Please select the top five (5) behavioral health topic areas that you need addressed through participation in this program AND briefly describe what you’d like to know more about related to the topic(s) selected.

<table>
<thead>
<tr>
<th>Behavioral Health Topic Area</th>
<th>Would you like to learn more about this topic? (Y/N)</th>
<th>Briefly describe what specifically you’d like to know more about related to the topic selected. (50 word maximum)</th>
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<tbody>
<tr>
<td>Parity &amp; the Affordable Care Act (ACA) (e.g., Federal policies/funding streams that impact behavioral health care including ACA, Parity, Block Grants, etc.)</td>
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<td>Behavioral Health State of the State (e.g., State payment and delivery reforms; relevant state-based behavioral health financing structures)</td>
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<td>Substance Use Treatment Legislative &amp; Policy Update &amp; Enforcement (e.g., Current Issues in the Treatment of Opioid Treatment Disorders)</td>
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<td>Future Trends in Behavioral Health (Mental Health and Substance Use Treatment)</td>
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<td>Why Integration? The Impact of Integrating Behavioral Health and Primary Care</td>
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<td>Building a Trauma Informed Nation: Moving the Conversation into Action (e.g., Adverse Childhood Experiences: Implications for Behavioral Health, Wellness, and Prevention; Trauma Informed Care; Trauma Resilient Communities)</td>
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<td>Workforce Development: Building behavioral health capacity among public health workforce</td>
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<td>Adopting Technology: Trends and Landscape of Behavioral Health Information Technologies (e.g., rural and telehealth)</td>
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<td>Role of Behavioral Health Systems within a Public Health Model</td>
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<td>Family inclusion principles and trauma-informed approaches</td>
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<td>Advancing cross-state agency partnerships to address challenges</td>
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Part III. Short Answer.

1. Why are you interested in participating in this third cohort of the Behavioral Health Training & Technical Assistance for Health Officials program? (400 word limit)

2. What do you hope to gain out of participating in this program? (250 word limit)

3. Please describe any existing collaborations/partnerships you currently have and/or wish to have with community behavioral health providers. Please include description(s) of any projects/initiatives that could be leveraged to support policy change. If you do not currently have existing collaborations/partnerships, please indicate any plans/ideas you have related to establishing such. (250 word limit)

4. What content related to behavioral health would make this program most meaningful for you and your health jurisdiction? (250 word limit)

Part IV. Participation Checklist & Applicant Confirmation.

We’d like for each participant (or identified alternate) to commit to participating in at least 80% of the outlined program activities.

- Introductory webinar for state/tribal/territorial/local health officials: November 9th, 2017 from 1:30-3:00pm ET*
- Up to four (4) topic-specific webinars: The first of which is tentatively scheduled for December 6th, 2017 from 2:00–3:30pm ET. Additional dates and topics TBD based on participant needs and availability.
- Up to four (4) conference calls: Specific dates TBD based on participant availability (Doodle poll to follow)
- In-person pre-conference Training:
  - Saturday, April 21st, 2018: Mental Health Tools for Public Health Training*
  - Sunday, April 22nd, 2018: Public/Behavioral Health Integration Meeting* & Networking Event
- National Council 2018 Annual Conference, which will feature a customized population health track for health officials and renowned expert speakers.
  - Tuesday, April 24th, 2018: Day 2, National Council Conference 2018 (continued).
  - Wednesday, April 25th, 2018: Day 3, National Council Conference 2018 (continued), ends at 1:00pm.
- Behavioral Health Training for Health Officials File-Sharing website. Which will include a resource library, regular posting of latest and greatest news and tools in behavioral health, and access to National Council webinars customized to meet the identified needs of health officials.