

17th Annual Case Management Conference

Call for Papers

Sponsored by:



Case Management: Relationships in Recovery

Embassy Suites, Old Market — Omaha, NE

Conference Dates: October 17-19, 2011

Pre-Conference: October 16, 2011

Mark your Calendar Now!

Proposals are requested for our 17th Annual Case Management Conference. We are especially interested in learning about topics that are innovative, cost-effective, evidence-based, multi-disciplinary, and community-based. Our goal is to further the field of case management through training, workshops, exhibits, and networking opportunities during the conference.

Conference Tracks

Tracks are intended to offer specific skills sets that are at a variety of learning levels.

Conference tracks for Case Managers, Service Coordinators, Consumers, and Administrators include:

- Primary Case Management Skills
- Early Childhood Services
- Adolescent and Youth Services
- Clinical Skills
- Recovery and Wellness
- Administration and Management
- Hot Topics

Proposals will be reviewed and selected by a committee designated by the NACM Board of Directors. We are grateful to presenters and panelists who volunteer to share their expertise and experiences with their colleagues. Thank you for your interest, time, and effort.

Return proposals to:

NACM

1645 'N' Street

Lincoln, NE 68508

Phone: 402-441-4385 Fax: 402-441-4335 Email: nacm@yournacm.com

You may also complete an online version available at:

www.yournacm.com

Please call Theresa Gomez at 402-441-4385 if you have any questions.

Proposal Deadline – June 10, 2011

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We are especially interested in learning about topics that are innovative, cost-effective, evidence-based, multi-disciplinary, and community-based. Potential topics are included below. We also encourage your own unique topic submissions.

Primary Case Management Skills

- Safety in the Office and the Field
- National Trends in Case Management/Best Practices/Evidence-Based Practices
- Case Management 101
- Engagement Skills
- Psychiatric Advance Directives
- Transitional Age Youth (18-25)
- Housing Support Services
- Homelessness
- Psycho-pharmacology
- Building Collaborations

Early Childhood Services

- Relationship-based, Therapeutic Practice/Attachment Issues
- Contemplation, Self-awareness, and Emotional Response
- Screening, Assessment, and Disorders
- Supportive Counseling and Empathy
- Effects of Trauma Across Developmental Ages

Adolescent and Youth Services

- Psycho-educational Groups
- High Risk Behavior/Suicidality in Adolescence
- Brain Changes/Brain Development during Adolescence
- Substance Use and Depression Issues Among Adolescents
- Labels, Stigma, Teasing, or Bullying
- Gay, Lesbian, Bisexual, Transgender, Questioning, and Intersex (GLBTQI)
- Trauma/ACE Study

Clinical Skills

- Motivational Interviewing
- Working with Families as Resources
- Cultural Competent Diagnosis/Assessment
- Getting and Keeping Culturally Diverse People in Services
- Dealing with Grief, Crisis, Trauma, or Disaster
- Co-Occurring/Dual Diagnosis
- Addressing Issues Related to Cultural Differences
- Trauma Informed Care

Recovery and Wellness

- Overview of Wellness Recovery Action Planning (WRAP)/Wellness Toolbox
- Resiliency and Recovery
- Supportive Employment
- Certified Peer Specialists
- System Transformation
- Peer Resource Centers/Drop-In Centers/Rose House Model
- Wellness Management
- Independent Living Skills

Administration and Management

- Ensuring Services are Accessible and Welcoming to Diverse Cultures
- Culturally Competent Services
- Professional Burnout/Self-Care/Compassion Fatigue
- Managing a Diverse Workforce
- Supervision Skills
- Team Building Skills
- Workplace Capability Issues/Peer Specialist Needs
- Ethics and Boundary Issues
- Clinical Supervision
- Productivity Management

“Hot Topics”

- Primary Care and Behavioral Health Integration
- Insurance Parity in Mental Health and Health Care Reform
- Health Care Reform
- Current Medicaid Issues on the Federal Level
- Working with Sexual Offenders
- Brain/Neurobiological Research
- Research and Evidence-based Practices

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For more information, please contact:
National Association of Case Management (NACM)
1645 ‘N’ Street
Lincoln, NE 68508
Phone: 402-441-4385 Fax: 402-441-4335
Email: nacm@yournacm.com



17th Annual Case Management Conference

Please answer every question and attach all requested items.

An online electronic version of this Call for Papers form is also available at www.yournacm.com.

1. Presentation Title: *(Please consider incorporating the conference theme “Case Management: Relationships in Recovery” into your title.)*

2. Please attach the following:

- | | |
|---------------------------------------|---|
| _____ This completed application form | _____ Fifty word abstract using exact wording to be |
| _____ Outline of presentation | _____ printed in the program (subject to editing) |
| _____ Three educational objectives | _____ Presenter(s) bio, resume, or vitae |

3. Proposed length of presentation: (circle one)
1 hour 2 hours

4. Experience level of audience: (circle one)
- | | | | |
|--------------|--------------|----------|------------|
| Introductory | Intermediate | Advanced | All Levels |
|--------------|--------------|----------|------------|

5. When, where, and for whom has this presentation been previously offered?

5. Audio/visual and facility requirements: *Note: All rooms are equipped with a screen and LCD projector. Presenters are strongly encouraged to bring a laptop computer and PowerPoint presentation.* (circle additional needs)

- | | | |
|-----------------------|-------------|--|
| 35mm slide projector | VCR/Monitor | Overhead Projector for use with transparencies |
| Flipchart and Markers | Laptop | Other _____ |

7. Lead presenter/contact person:

Name, licensure/degree: _____

Organization: _____

Address: _____ City: _____ State: _____ Zip: _____

Phone: _____ Fax: _____ Email: _____

8. Co-Presenters and panelists: (Attach contact information for each additional presenter)

Name, licensure/degree: _____

Organization: _____

Address: _____ City: _____ State: _____ Zip: _____

Phone: _____ Fax: _____ Email: _____

9. Agreement: In submitting this proposal, I/we understand that NACM is not offering to pay for this presentation, travel, lodging, meals, or other expenses associated with this conference. Up to two presenters will receive a 25 percent discount off their NACM conference registration fee. If selected, I/we agree to present on the assigned date and time during the conference October 17-19, 2011, at the Embassy Suites in Omaha, NE. All applications will receive written notification of acceptance or denial once submissions have been reviewed by the NACM conference committee.

Signature of Presenter(s): _____

Please return proposals to : **National Association of Case Management (NACM)**

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DATED MATERIAL



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