

AFFILIATED TRAININGS 2012 SUBMISSIONS



The Affiliated Trainings 2012 will be held Friday, September 7 through Saturday, September 8, 2012 prior to the 17th International Conference (September 9-12, 2012) at the Town & Country Resort & Convention Center, San Diego CA. IVAT is accepting submissions for Half-day, One or Two Day in-depth affiliated trainings, organized by collaborating agencies on a variety of topics.

ALL AFFILIATED TRAININGS accepted will require a signed Memorandum of Understanding (MOU)
Affiliated Training Submission Deadline: February 10, 2012

Checklist:

- Complete one application form for each training submission (electronic submissions only)
- 50 word abstract of presentation to be published in the program, if accepted
- Objectives of presentation
 - 3 objectives for ½ day, 6 objectives for full day sessions (See example on p. 5)
- 300 word summary of presentation that discusses the content of presentation (See example on p. 5)
The following should be included in summary
 - Presentation title
 - Main points to be covered in presentation
 - Relevance to Conference attendees
 - Intended audience
 - How this session is unique
- Outline of presentation. The outline should include all identifying information, such as names and affiliations of presenters and include 3 tiers. (See example on p. 6)
- One-page bio or federal biosketch for the primary presenter, including licensing and education credentials relevant to workshop
- One-paragraph bio or biosketch for each co-presenter identified on the Submission Application Form, including licensing and education credentials relevant to workshop
- Complete the Audio/Video request form
- Include an e-mail address for acknowledgement of receipt of submission and notification decision, and continued follow-up
- Include an e-mail address and primary contact number for each co-presenter
- Provide licensing and education credentials along with any presentation experience Provide on a separate sheet
- Submit your proposal using one of the following methods:
 - Online at www.ivatcenters.org
 - Via e-mail: psmith@alliant.edu
 - Standard mail (postmarked by February 10, 2012) to:

ATTN: AFFILIATED TRAININGS 2012 SUBMISSIONS

Institute on Violence, Abuse & Trauma
10065 Old Grove Road, Ste. 101
San Diego, CA 92131

- Faxed Submissions will not be accepted
- Incomplete or late submissions will not be processed
- Once accepted, all presenters are required to register for their own Affiliated Training
- IVAT is not responsible for any presenters' expenses, to include: travel, lodging and/or meals
- Upon acceptance, a signed agreement (MOU) with IVAT will be required
- IVAT will make all decisions for continuing education credits

For more information, please call 858-527-1860 x4042 or e-mail psmith@alliant.edu

SUBMISSION APPLICATION AFFILIATED TRAININGS 2012

(Type or print clearly)

Complete and return this form with your submission.

NAME OF INDIVIDUAL/ORGANIZATION SUBMITTING APPLICATION:

_____	_____	_____
Name	E-Mail Address	Phone
_____	_____	_____
Fax	Organization	Website

TITLE OF PRESENTATION (84 Characters maximum, including spaces):

AUDIENCE LEVEL (Check One)

- ALL:** Appropriate for all audiences, beginning through advanced.
- BEGINNING:** Appropriate for attendees as an introduction to a topic.
- INTERMEDIATE:** Appropriate for attendees who already have basic information on a topic and have been in the field 5-10 years.
- ADVANCED:** Appropriate for attendees who have worked in the field for over 10 years and are experienced.

Date Preference (Check only one)

_____ Friday, September 7, 2012
_____ Saturday, September 8, 2012

LENGTH OF WORKSHOP (Number in order of preference/NA if not applicable)

- _____ Morning (8:00 a.m. – 12:00 p.m.)
- _____ Morning (9:00 a.m. – 12:00 p.m.)
- _____ Afternoon (1:00 p.m. – 5:00 p.m.)
- _____ Afternoon (1:00 p.m. – 4:00 p.m.)
- _____ Full Day (8:00 a.m. – 4:00 p.m.)
- _____ Full Day (8:00 p.m. – 5:00 p.m.)
- _____ Full Day (9:00 a.m. – 4:00 p.m.)
- _____ Full Day (9:00 a.m. – 5:00 p.m.)
- _____ Two Days (9:00 a.m. – 5:00 p.m.)

LIST TARGET AUDIENCE INTENDED:

_____	_____
_____	_____
_____	_____
_____	_____
_____	_____

PRESENTER INFORMATION

PRIMARY PRESENTER: _____ Title: Mrs. Mr. Dr. Others _____

Highest Degree _____ Professional License (If applicable) _____

Occupation List			
Advocate	Attorney	Clergy	Counselor
Consumer	Corrections	Criminologist & Criminal Justice	
Educator	Judge	Law Enforcement	MFT
Military	Nurse	Parole	Physician
Policy Maker	Probation	Psychiatrist	Psychologist
Researcher	Shelter & Crisis Center Worker	Survivor	Volunteer

Affiliation _____

Degree Field _____ Degree Year _____ School _____

OCCUPATION: Please state your *primary* category using the list above _____

Mailing Address _____

City _____ State _____ Country _____ Zip Code _____

Home Phone _____ Mobile Phone _____

Business Phone _____ Fax _____

Email _____

Current Employer _____

Business Address _____

Business City _____ State _____ Country _____ Zip Code _____

2nd PRESENTER: _____ Title: Mrs. Mr. Dr. Others _____

Highest Degree _____ Professional License (If applicable) _____

OCCUPATION: Please state your *primary* category using the list above _____

Degree Field _____ Degree Year _____ School _____

Mailing Address _____

City _____ State _____ Country _____ Zip Code _____

Home Phone _____ Mobile Phone _____

Business Phone _____ Fax _____

Email _____

3rd PRESENTER: _____ Title: Mrs. Mr. Dr. Others _____

Highest Degree _____ Professional License (If applicable) _____

OCCUPATION: Please state your *primary* category using the list above _____

Degree Field _____ Degree Year _____ School _____

Mailing Address _____

City _____ State _____ Country _____ Zip Code _____

Home Phone _____ Mobile Phone _____

Business Phone _____ Fax _____

Email _____

4th PRESENTER: _____ Title: Mrs. Mr. Dr. Others _____

Highest Degree _____ Professional License (If applicable) _____

OCCUPATION: Please state your *primary* category using the list above _____

Degree Field _____ Degree Year _____ School _____

Mailing Address _____

City _____ State _____ Country _____ Zip Code _____

Home Phone _____ Mobile Phone _____

Business Phone _____ Fax _____

Email _____

5th PRESENTER: _____ Title: Mrs. Mr. Dr. Others _____

Highest Degree _____ Professional License (If applicable) _____

OCCUPATION: Please state your *primary* category using the list above _____

Degree Field _____ Degree Year _____ School _____

Mailing Address _____

City _____ State _____ Country _____ Zip Code _____

Home Phone _____ Mobile Phone _____

Business Phone _____ Fax _____

Email _____

SAMPLES

THIS EXAMPLE APPLIES TO A RESEARCH PRESENTATION (Intermediate Level).
USE THE SAME FORMAT FOR PANELS, WORKSHOPS AND CLINICAL PRESENTATIONS.

Sample Abstract

This research project investigates the effects of subconscious socioeconomic bias on social worker risk assessment decision making in Child Protective Services. The impact of bias on interpretation and utilization of structured decision making tools is examined. Training to reduce biased decisions, improve standardization of decisions and best utilize agency resources is discussed.

Sample Objectives:

Objective 1.

Participants will be able to describe 3 ways subconscious bias is formed and ways it can affect decision making in all areas of practice.

Objective 2.

Participants will be able to identify 3 types of bias and the potential unintended consequences of bias influenced decisions.

Objective 3.

Participants will be able to describe 3 ways to increase attentional focus on subconscious bias and reduce the effects.

Sample: 300 Word Summary:

Child Protective Services is currently faced with decreasing resources and increasing caseloads. The State budget crisis is having a major impact on services to at risk children and families in the state. California is currently working to meet Federal guidelines and standards for improvement in service delivery. Program Improvement Plans and Reviews are conducted annually to provide evaluation and on-going improvement. There is scant research on the effects of bias in decision making and utilization of recently implemented structured decision making tools. This research project explores the effect of worker implicit socioeconomic bias on risk assessment decisions. Bias influence can lead to errors in decisions through all phases of case management. Biased decisions further jeopardize children and families and prevent proper allocation of agency resources. Decision making tools have recently been developed to standardize the process of risk assessment. The effect of subconscious bias can prevent accurate interpretation and utilization of structured decision making tools. Errors in risk assessment can lead to further trauma for children. Research literature indicates that once identified, implicit bias can be reduced by increasing attentional focus. Recommendations for training to increase attentional focus and reduce bias in risk assessment are provided in this presentation. Implementation of training to reduce bias in assessments will facilitate proper interpretation and utilization of structured decision tools. Proper utilization of decision tools will improve compliance with Federal guidelines and meeting objectives of Program Improvement Plans. Agency resources will be utilized more effectively. At risk children and families will benefit from improved service delivery. Attendees will understand the importance of recognizing personal bias and ways to reduce the effects.

Relevance to attendees: Risk assessment is at the heart of child protection. It is essential that workers be provided with proper training in this area. Reduction in error decisions will reduce negative outcomes

Sample Outline (Must include three levels of information)

1. Research
 - a. Current efforts to standardize risk assessment
 - i. Structured decision making tools
 - ii. Evaluation and improvement
2. Effect of subconscious bias on risk assessment decisions
 - a. Types of bias
 - i. socioeconomic bias
 - ii. cultural bias
 - b. Origins of bias
 - c. Utility of bias in cognitive processes
 - d. Unintended consequences
3. Implications for practice
 - a. Effects of biased decisions
 - i. Added trauma to children
 - ii. Poor utilization of agency resources
 - iii. Difficulty meeting Program Improvement objectives
 - b. Developing training to increase attentional focus
 - i. Facilitating interpretation and utilization of structured decision tools
 - ii. Information to raise awareness of subconscious bias
 - iii. Identifying bias
 - iv. Reducing bias in decision making