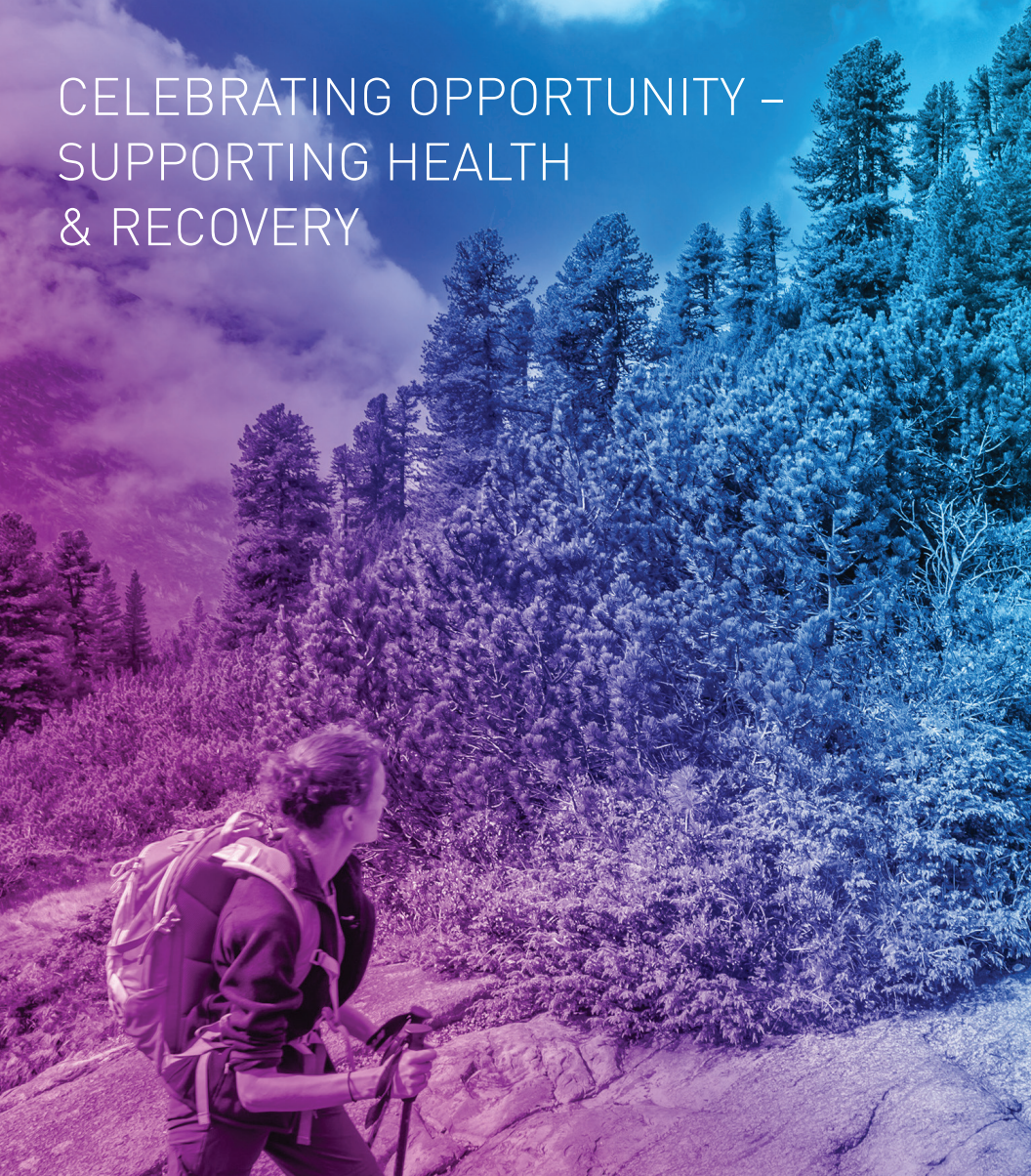


CELEBRATING OPPORTUNITY –  
SUPPORTING HEALTH  
& RECOVERY



2017

Washington Behavioral  
Healthcare Conference

June 14-16 | Vancouver, Washington  
Hilton Vancouver WA



WASHINGTON COUNCIL  
FOR BEHAVIORAL HEALTH

# WELCOME

**Welcome to the 28th annual Washington Behavioral Healthcare Conference (WBHC), Celebrating Opportunity – Supporting Health & Recovery!** Our state and nation face uncertainty and challenges as healthcare policy and financing landscapes shift under a new federal administration. However, Washington was granted an enormous opportunity to better support health and recovery when CMS approved a five-year Medicaid Transformation Demonstration Waiver. Let's work together to make the most of this opportunity to improve the lives and health of people living with the challenges of mental illness and/or addictions.

To that end, we're pleased to bring you a conference that will focus on facing obstacles, advancing hope, health and recovery, and seizing opportunities to make a difference. We've prepared an exciting and diverse lineup of inspiring speakers, national and regional experts, consumer leaders, and local providers who will offer knowledge, tools and resources to take back to your community.

We hope this gathering of the behavioral health community from across the state will strengthen existing partnerships and inspire new ones.

We gratefully acknowledge support for the WBHC from the DSHS Behavioral Health Administration/Division of Behavioral Health & Recovery and from the Department of Corrections.

Sincerely,

Ann Christian, CEO  
Washington Council for  
Behavioral Health

Jeff Thomas, Chair  
Washington Council for  
Behavioral Health &  
CEO, Frontier Behavioral  
Health

Darcell Slovek-Walker, Chair  
Washington Council for Behavioral  
Health Education Committee &  
CEO, Transitional Resources

## WHO WE ARE

The Washington Council for Behavioral Health (WA Council) is the sponsor and organizer of the annual Washington Behavioral Healthcare Conference. Over the past 37 years the WA Council and its provider members have worked to promote the creation of healthy and secure communities through partnerships. The WA Council is a non-profit, professional association of licensed community behavioral health centers across the state of Washington who have joined together to create a unified, representative voice that speaks on behalf of community behavioral health. Advocating in support of community behavioral health centers and behavioral health consumers, the WA Council develops public policy initiatives, promotes alliances and provides top-quality mental health care education.

The WA Council is grateful for major conference funding support from the DSHS Behavioral Health Administration/Division of Behavioral Health & Recovery and from the Department of Corrections.

# CONFERENCE GUIDE

## Conference Locations

Locations are detailed on the fold out page of this program guide. Registration, breakfast and lunches, breakout sessions, receptions, and vendors will all be located in the Hilton Vancouver Washington.

## Breakfasts and Luncheons

Breakfasts and luncheons will be held in the Heritage Ballroom of the Hilton Vancouver Washington. Please wear your name badge to breakfasts and lunches as this will serve as your meal ticket.

## Welcome Reception

The Welcome Reception from 4:30 pm – 6:30 pm on Wednesday will be held in Discovery CDE of the Hilton Vancouver Washington. This event is open to all conference attendees.

## Workshops

Workshops on both days will be in various locations throughout the Hilton Vancouver Washington. Please refer to the schedule for the location of each session.

## Name Badges

All registrants will receive a name badge at the time of check-in. The badge indicates that you are registered and may attend all conference activities. Please wear your name badge during conference hours.

## Messages

During the actual conference hours, messages may be left for conference participants by phoning **360-993-4500** and asking to be transferred to the Behavioral Healthcare Conference. Messages will be posted on a message board near the conference registration area. Please check the message board regularly. Phone calls can only be received at this number during business hours (8:00 a.m. – 5:00 p.m.). Please plan an alternate notification system for emergencies that might arise after hours. Conference staff are unable to forward calls to guest rooms. Please dial individual hotels directly to contact hotel guests.

## Speaker Check-In

Speakers are asked to check in at Registration for the purposes of coordinating session preparation.



Wednesday, June 14

## Pre-Conference Activities

Subject to Change

**Location: Hilton Vancouver Washington**

**8:00 am – 5:00 pm • Pre-Conference Programs**

9:00 am – 4:30 pm • Pre-conference Seminar: **Law & Ethics Training: What Goes Around...**(6.0 CE clock hours) (additional registration fee required) – **Heritage C**  
(Lunch on your own)

*A. Steven Frankel, PhD, Esq., Adjunct Professor of Law, Golden Gate University School of Law and Clinical Professor of Psychology, University of Southern California*

This six-hour workshop in law, ethics and regulation is focused on recent and emerging developments in law and ethics that will impact clinicians of all disciplines, starting with changes to child abuse reporting obligations, then moving to cover changes for custody evaluators, record-keeping and maintenance, emerging issues and risks regarding telehealth practice, updates on duties to inform and warn when violent behavior may occur, modifications of laws concerning “retirement” of professionals, receiving subpoenas, testifying in court, risk management for supervisors, suicide risk management, and “selected slippery slopes.” At the end of this session, attendees will be able to identify at least three areas of practice for which legal/ethical changes have developed in the past 5-10 years, state the most effective strategy for maintaining clinical records of patient care, identify two significant problems for clinicians who wish to provide telehealth services, state two major cautions for clinicians who receive subpoenas for patient records, elaborate the differences between three classes of witnesses in courts, and identify two “slippery slopes” of concern to clinician risk management.

*This educational program fulfills continuing education requirements required by Washington State for Licensed Social Workers, Mental Health Counselors and Marriage and Family Therapists for the mandatory biennial “Law and Ethics” training requirements. Certificates for 6.0 CEUs will be issued to attendees who attend the program in its entirety.*

**9:00 am – 4:30 pm**

Pre-conference Seminar: **Assessing & Managing Suicide Risk** (6.25 CE clock hours)  
(additional registration fee required) – **Heritage D**  
(Lunch on your own)

*Jennifer Barron, BSW, MA, MBA, Forefront, University of Washington School of Social Work*

Assessing & Managing Suicide Risk (AMSR) is a one-day workshop for health professionals that will help them better assess suicide risk, plan treatment, and manage the ongoing care of clients at-risk for suicide. Behavioral health providers play a crucial role in preventing suicides and yet, many providers report that they feel inadequately trained to assess, treat and manage suicidal clients. AMSR meets providers’ needs for research-informed, skills-based training, and is appropriate for all

mental health professionals including social workers, marriage & family therapists, psychologists and licensed mental health counselors. By the end of the workshop, attendees will be able to recognize the 12 core competencies that enable social workers and mental health professionals to assess and work effectively with individuals at risk of suicide; increase their knowledge and skills in eliciting suicide ideation, behavior, plans and intent; increase their knowledge and skills in making a clinical judgment of the short and long term risks for suicide; and increase their knowledge and skills in developing a treatment and services plan that addresses the client's immediate, acute and continuing risk for suicidal behaviors. AMSR meets the legislative mandate for training under ESHB 2366.

**Pre-Conference Membership Activities for  
WA Council for Behavioral Health Member Agencies**

**8:00 am – 9:00 am**

WA Council Board Meeting – **Board Room**

**9:00 am – 12:00 pm**

WA Council General Membership Meeting – **Cedar Room**

## Wednesday Conference Activities

**8:00 am – 6:00 pm** • Registration Open – **Heritage Lobby**

Location: Hilton Vancouver Washington

**4:30 pm – 6:30 pm**

**Welcome Reception** (CE clock hours not available) – **Discovery CDE**

Come mingle and network with fellow conference attendees and beat the Thursday morning registration rush! Light appetizers and refreshments will be provided.

**5:30 pm – 7:00 pm**

**Peer Support Reception** (CE clock hours not available) – **Discovery AB**

The Division of Behavioral Health and Recovery's Peer Support Program invites certified peer counselors and those interested in becoming certified peer counselors to a reception. This is an opportunity to meet and network with other certified peer counselors, provide input to the Division regarding your experiences with peer support, and to celebrate the life-changing service certified peer counselors provide across the state. Refreshments will be provided.

Thursday, June 15

**7:30 am - 5:00 pm • Registration Open – Heritage Lobby**

*Location: Hilton Vancouver Washington*

**7:30 am – 8:30 am • Breakfast – Heritage Ballroom**

Vendor Tables Open

**8:30 am - 10:00 am • Welcome**

**Jeff Thomas**, Chair, Washington Council for Behavioral Health and CEO, Frontier Behavioral Health

**Chris Imhoff**, Director of the Division of Behavioral Health & Recovery, DSHS, or a designee



**KEYNOTE ADDRESS by Kevin Briggs**

**The Bridge Between Suicide and Life**  
(1 CE clock hour)

Sergeant Kevin Briggs will speak about his experiences as a California Highway Patrol officer who for many years patrolled the Golden Gate Bridge, the most utilized site in the United States for loss of life to suicide. While on patrol, he encountered numerous individuals clinging to life by a thread – individuals who had lost hope and could see no way out of their current situation, and who were ready to jump off the

bridge in hopes of ending their pain and hopelessness. Sgt. Briggs, through his compassion, gentle voice, eye contact, and his innate ability to “listen to understand,” encouraged more than 200 individuals over his career to either not go over the bridge’s rail or to come back to solid ground from their precarious perch on the bridge’s chord in order to start a new chapter in their life. Join Sgt. Briggs as he discusses specific interactions with individuals contemplating suicide, what to say, what not to say, and how “listening to understand” is vital to building rapport with those in crisis.

**10:15 am – 11:45 am • Workshops**

**T101 Stepping Up Together: Our Journey to Reduce Mental Illness in Pacific County Jail** (1.5 CE clock hours) – **Pine/Spruce**

*Katie Lindstrom, Pacific County; Pat Matlock, Pacific County Jail Administrator; Rosanne McPhail, Pacific County*

Two million individuals with mental illness are admitted to our nation’s jails annually, and nearly 1.5 million have co-occurring disorders, are often incarcerated for nonviolent offences related to their condition, and become trapped in a revolving door of arrest, release, poverty, deterioration of health, and re-arrest. This session will demonstrate the need for community partnerships and actions to create a system that connects individuals with services so they can avoid repeated incidents of incarceration. We’ll describe our community’s demographics and historic community partnerships, define Collective Impact, and explain the progression of criminal justice partnerships in Pacific County. The presentation will discuss data collection and a summary of our progress to

date in leveraging more funds at the national, state and county level, the county's involvement in the national Stepping Up Initiative, and more.

### **T102 Trauma Informed Supervision (1.5 CE clock hours) – *Discovery A***

*Stacey Devenney, MA, CDP, LMHC, CMHS, Kitsap Mental Health Services; Damian Uzueta, MBA, MSN, RN-BC, Kitsap Mental Health Services*

This presentation describes the essence of collaborative leadership under the umbrella of trauma informed care, as well as the process and strategic considerations necessary in developing and rolling out trauma informed supervision. After a refresher on the meaning and value trauma informed supervision bring to teambuilding, we'll cover how using a collaborative tool enhances a leader's ability to have meaningful discussions, incorporate awareness of a larger perspective, and discuss items which may get sidelined due to higher priority ideas. We'll also discuss a wide variety of leadership topics, including administrative, clinical, and important follow-up items, possible implementation plans, and have a small group discussion centered on utilizing tools for trauma informed supervision.

### **T103 Empathy in Action: How Our Community Created a Peer to Peer Support Program for Youth (1.5 CE clock hours) – *Alder Room***

*Kris Henriksen, Clark County Dept. of Community Services*

Join us for an engaging experience of hope and possibilities as you learn how a small community created a peer to peer support program for young people. We've created a peer support program that offers compassion and resources to young people experiencing struggles of all kinds, helping them feel valued, safe, and respected. Learn about the value and challenges around anonymous and confidential support. Find out how to develop a network of young volunteers who are respectful, inclusive, and non-judgmental. Develop your "I Know What It's Like To" skills, so you can find empathy and compassion for those experiencing circumstances that are foreign to you. Work through the process of establishing healthy self-care for volunteers, setting clear boundaries for all involved, and learn about how we mixed fun and empathy on social media.

### **T104 Health Homes Care Coordination & Collaboration with Behavioral Health Agencies: 3 Perspectives (1.5 CE clock hours) – *Discovery DE***

*Rena Cleland, RN, Molina Healthcare; Jeff Thomas, EdD, Frontier Behavioral Health; Debbie Johnson, Columbia River Mental Health Services*

Health homes were created in 2013 as part of the Affordable Care Act to serve high risk members who often have behavioral health and substance use disorders, multiple chronic illnesses, and complex social resource needs. Collaboration occurs with a variety of partners and plays an important role in health homes' success. Experienced care coordinators provide 6 main services: care management, care coordination, transitions of care, health promotion, member and family support, and referral to community services; they help clients manage physical, behavioral health and social needs. This session will provide a program overview, then focus specifically on strategies, successes and challenges that behavioral health agencies encounter delivering health home services as a contracted Care Coordination Organization (CCO) in integrated and non-integrated systems. Please join us to learn more about health homes from MCO, CCO and behavioral health perspectives.

### **T105 Beyond ACES: The Impact of Racism on Those We Serve (1.5 CE clock hours) – Hemlock/Oak**

*Roy Fisher, MA, LMFT, Efficient Counseling, PLLC*

An increased focus on trauma in the field of mental health over the last several years has presented clinicians with the opportunity to examine how Adverse Childhood Experiences and other complicated trauma can negatively impact the health and wellness of the people they serve. Unfortunately, the ACE study does not explicitly examine how racially-based trauma experiences impact specific groups. Indeed, race still matters. Beyond adverse childhood experiences, African-Americans, Latinos, and Native Americans continue to navigate a world where they are viewed negatively, and this inarguable reality certainly has a measurable mental health effect. Clinicians must consider the impact and legacy of slavery, colonization, and immigration on the overall wellbeing of these groups. Therefore, providers are advised to examine the trauma experiences of these populations through a racial lens if they are to provide culturally competent services. This presentation provides general training, assessment, treatment and supervision guidelines related to expanding how clinicians consider trauma and the lived experiences of many people of color.

### **T106 An Overview of New Journeys, WA State's First Episode Psychosis Initiative (1.5 CE clock hours) – Discovery B**

*Maria Monroe-DeVita, PhD, University of Washington; Michael McDonell, PhD, Washington State University; Todd Blair, MA, Comprehensive Healthcare*

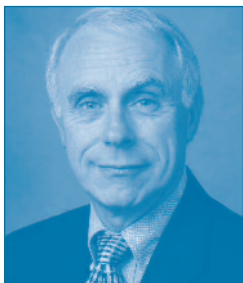
This presentation will provide information, resources and data on WA State's New Journeys early intervention model for treating people experiencing first episode psychosis. The three current New Journeys pilot teams serve 25 clients using the NAVIGATE early intervention model. This interdisciplinary, team-based model includes Family Education, Individual Resiliency Training, Psychopharmacological Treatment & Medication Management, Supported Employment & Education, peer support, and case management services. This presentation will describe team member roles and bring awareness to the early signs of psychosis, as well as the importance of building early intervention services to address the needs of people experiencing first episode psychosis. Presenters will also provide data-based and first-hand accounts of what New Journeys entails so participants can take the first steps toward implementing and replicating a New Journeys program in their agency.

### **T107 The Medicaid Demonstration Project & Permanent Supportive Housing (1.5 CE clock hours) – Discovery C**

*Melodie Pazolt, DSHS Division of Behavioral Health & Recovery; Wanda Johns, DSHS Division of Behavioral Health & Recovery*

The expansion of Medicaid has increased the number of eligible recipients in Washington, and the State has applied to the Centers for Medicare & Medicaid Services for a five year 1115 Demonstration Waiver. This opportunity funds and provides services not typically covered by Medicaid, and allows us to demonstrate to a federal funding source that investing money in supportive housing services will result in a substantial increase in savings on other social and healthcare services. This presentation will provide updates on the following programs: Permanent Options for Recovery Center Housing (PORCH), Bringing Recovery into Diverse Groups through Engagement & Support (BRIDGES), Housing & Recovery through Peer Services (HARPS), and Projects for Assistance in Transition from Homelessness (PATH).

11:45 – 1:15 pm • LUNCH – *Heritage Ballroom*



**KEYNOTE ADDRESS** by Hank Steadman, PhD

**Reducing the Involvement of Persons with Behavioral Health Disorders in the Criminal Justice System Through Jail Diversion Programs** (1 CE clock hour)

The dramatic overrepresentation of persons with behavioral health disorders in criminal justice systems has been well known for some time. The data on the effectiveness of many types of jail diversion programs is also well known. We know how to do more to prevent this. Why haven't we?

This presentation will address a major obstacle, the absence of a focus on the community as the basic unit of analysis rather than any single type of jail diversion program. With a community focus, the Sequential Intercept Model that examines five points of intercept in the criminal justice system can be an extremely useful tool to plan a comprehensive array of jail diversion programs that can reduce the use of jail for persons with behavioral health disorders. By looking at law enforcement, initial detention and arraignment, jail and disposition courts, reentry, and community corrections as connected pieces of the criminal justice system across a community, opportunities for diversion can be better prioritized and improved strategic planning can be developed.

1:30 pm – 3:00 pm • **Workshops**

**T201 Treating Incarcerated Women with Mental Illness & Trauma**  
(1.5 CE clock hours) – *Discovery DE*

*Rain Carei, PhD, Dept. of Corrections Washington Corrections Center for Women*

There are nearly 1,000 traumatized and incarcerated women housed at the Washington Corrections Center for Women (WCCW) in Gig Harbor, WA. Out of these 1,000 women, only about 1% remain behind bars for life; the rest return to our communities. The complex clinical presentation of women in corrections demands a deeper understanding of psychological defenses in order to intervene from a trauma-informed and clinically responsive approach. This presentation will focus on providing information on the defensive functioning of traumatized women, educate participants on the six levels of defensive functioning, and help participants develop clinically bilingual skills when explaining and working with defenses in traumatized clients. Emphasis will also be placed on the necessity of deepening clinical skills through different learning modalities to enhance clinical understanding and to reduce secondary trauma.

**T202 Barriers & Solutions in Washington's Behavioral Health Workforce**  
(1.5 CE clock hours) – *Hemlock/Oak*

*Nova Gattman, MPA, Workforce Training & Education Coordinating Board; Rachelle McCarly, ND, MPH, University of WA Center for Health Workforce Studies*

This presentation by the Workforce Training and Education Coordinating Board, in collaboration with the UW's Center for Health Workforce Studies, will inform participants of the results to-date of Washington's Behavioral Health Workforce Assessment. Presenters will describe efforts to analyze factors affecting the supply,

*Continued on next page*

demand, and availability of the behavioral health workforce in our state. They'll also cover programs in WA and other states to address the top workforce barriers identified in the assessment, and resources available for training the behavioral health workforce to successfully deliver integrated care. There will also be a group discussion of promising models or practices, providing an opportunity for all participants to take away new ideas on how best to recruit, retain, and train behavioral health workers for current and future care delivery.

### **T203 The Road to Recovery: Melding Mental & Physical Wellness** (1.5 CE clock hours) – **Discovery A**

*Donna Dykstra, Certified Peer Support Specialist; Zach Filer, Northwest Strength & Performance*

Recovery is a unique and individualized journey. It starts with first having hope that recovery is possible and builds upon setting and achieving personal goals. Clinical services are often an important part of the journey; peer support is a crucial component. Many people in recovery seek to improve their physical wellness but encounter struggles with motivation, lack of resources, and lack of information. Studies show that physical wellness and mental wellness are intertwined, so ways of succeeding in physical wellness are important. LiveForward is an approach to peer support that melds these two elements. The two presenters, one whose recovery journey began with peer support and was strengthened through athletic endeavors, and the other whose athletic endeavors led him to his own recovery journey and peer support, will share ways to support peers in overcoming the barriers and challenges to achieve both mental and physical wellness goals.

### **T204 Peer Supports: New Roles in Integrated Care** (1.5 CE clock hours) – **Discovery C**

*Catherine Callahan-Clem, Certified Peer Counselor, Sound Mental Health; Jody Schreven, Certified Peer Counselor, Sound Mental Health; Theresa Winther, MA, LMFT, CDP, CMHS, Sound Mental Health*

As integration continues to move forward, peer specialists will be key in providing both behavioral and medical support for clients across the continuum of care, and their recruitment and training will continue to evolve. Management will be hiring individuals with training, experience, and certification in addition to their lived experience. Peer counselors who take advantage of continuing education offerings on subjects like Motivational Interviewing and co-occurring disorder programs, along with peers who have been facilitating Whole Health Action Management (WHAM) groups and parent peer specialists who assist in improving global health management for families, will be well situated as integration progresses. This workshop will share the tools needed by any organization wishing to refashion and solidify its peer workforce, allowing for an effective and smooth transformation while expanding peer networks in integrated care.

### **T205 Exploring Opportunities to Create an Effective and Diverse Workplace** – **Alder Room**

*Danie Eagleton, MEd, LMHC, Navos*

This workshop will focus on 3 areas of interest concerning today's behavioral health workforce. Behavioral Health organizations are feeling the pressure and need to increase their workforce, but are faced with limited numbers of recruits. First, we'll discuss what's happening with social and human services programs and counselor prep programs in

community colleges and universities. We'll also focus on the importance of creating relationships and partnerships with these programs, sharing strategies and tips that you can implement in your organization. Next, we'll cover diversifying our workforce, talking about strategies for recruiting a more diverse candidate pool, and what needs to be in place to keep these employees. Finally, discussion will turn to how we're engaging and orienting staff who are either interns or just beginning in the field: how are we introducing them to the field of behavioral health? Come join us for a lively discussion!

**T206 Characteristics of Successful Supported Employment Programs**  
(1.5 CE clock hours) – *Pine/Spruce*

*Lisa Floyd, MNPL, MHP, King County Behavioral Health Organization; Mike Donegan, LICSW, Downtown Emergency Service Center; Sunny Lovin, LICSW, Harborview Mental Health & Addictions Services*

Come learn about the administrative, programmatic and staffing components that contribute to a successful supported employment (SE) program in anticipation of SE expansion through Medicaid funding. This presentation will provide an overview of what it takes to provide SE services based on the Individual Placement and Support (IPS) model. DESC and Harborview Mental Health & Addictions will describe recommendations including programming and day to day activities that cultivate a culture of employment not only within the SE teams but throughout a behavioral health agency. King County will review findings from a four year study on the impact of SE on reducing hospitalizations and incarcerations, and provide information on how administrators can enhance and support the SE teams. Presenters will also discuss the importance of establishing peers as critical contributors, especially for clients considering pursuing their employment goals. Attendees will also learn about hiring practices, prioritizing staff targets that are most helpful to achieve job placement outcomes, and managing data.

**T207 Diversion Services in WA: Perspectives from State, Legal & Law Enforcement Communities** (1.5 CE clock hours) – *Discovery B*

*Ingrid Lewis, JD, DSHS Office of Forensic Mental Health Services; Nikki Behner, ARNP, DNP, MPH, Psychiatric Nurse Consultant; Pete DeSanto, JD, King County Prosecuting Attorney's Office*

Individuals with behavioral health issues are overrepresented in the criminal justice system. High arrest and recidivism rates act as barriers to the recovery of these individuals, and many would be better served in outpatient behavioral health settings if more services were available to divert them to care rather than incarceration. This, along with other factors, has created broad support for diversion resources across health, criminal justice, and advocacy fields. Presenters will lead an interactive discussion on principles of diversion from their perspectives, meeting with stakeholders beyond the mental health community to discuss solutions and strategies for effective diversion service delivery, tailoring outreach for support to different audiences, barriers and challenges to diversion from their unique perspectives, and examples of successful diversion models, including outcomes.

# ACTIVITIES AT A GLANCE

## Wednesday, June 14 · Pre-Conference Programs

8:00 am – 6:00 pm	Conference Registration – <b>Heritage Lobby</b>
8:00 am – 9:00 am	WA Council Board Meeting – <b>Board Room</b>
9:00 am – 12:00 pm	WA Council General Membership Meeting – <b>Cedar Room</b>
9:00 am – 4:30 pm	Law & Ethics Training: What Goes Around... – <b>Heritage C</b>
9:00 am – 4:30 pm	Assessing & Managing Suicide Risk – <b>Heritage D</b>
4:00 pm – 8:00 pm	Vendor Set Up
4:30 pm – 6:30pm	Welcome Reception – <b>Discovery CDE</b>
5:30 pm – 7:00 pm	Peer Support Reception – <b>Discovery AB</b>

TRACKS	CORRECTIONS & MENTAL HEALTH	MANAGEMENT, LEADERSHIP & OPERATIONS
10:15 am-11:45 am	<b>T101 – Pine/Spruce</b> Stepping Up Together: Our Journey to Reduce Mental Illness in Pacific County Jail	<b>T102 – Discovery A</b> Trauma Informed Supervision
11:45 am–1:15 pm	<b>LUNCH &amp; KEYNOTE ADDRESS</b> by <b>Hank Steadman, PhD, Ret.</b>	
1:30 pm–3:00 pm	<b>T201 – Discovery DE</b> Treating Incarcerated Women with Mental Illness & Trauma	<b>T202 – Hemlock/Oak</b> Barriers & Solutions in Behavioral Health Work
3:15 pm–4:45 pm	<b>301 – Alder Room</b> LEAP SW WA: Providing Employment Services in the Clark County Jail	<b>T302 – Discovery C</b> I'm the CEO...Uh, Oh! F
4:45 pm – 5:15 pm 5:30 pm – 7:00 pm	<b>Cracker Barrel Sessions • (1) Integrated Care Expansion in Recovery &amp; Resiliency Roundtable – Hemlock/Oak</b>	

## Friday, June 16 Conference Programs

7:30 am – 9:00 am	<b>BREAKFAST – Heritage Ballroom</b>	
	<b>VENDOR TABLES OPEN</b>	
9:00 am – 10:00 am	<b>KEYNOTE ADDRESS</b> by <b>Victoria Maxwell, That's Just Crazy</b>	
10:15 am – 11:45 am	<b>F401 – Discovery C</b> Forensic Mental Health Counseling: Primary Mental Health Providers for the 21st Century	<b>F402 – Discovery DE</b> Lessons in Leadership: Battle of Gettysburg
11:45 am -12:45 pm	Lunch and Awards Presentation – <b>Heritage Ballroom</b>	
1:30 pm –3:00 pm	<b>F501 – Pine/Spruce</b> Peer to Peer Mentoring Program in the Clark County Jail	<b>F502 – Alder Room</b> How to Access Government Repayment Programs for Clinicians

## Thursday, June 15 · Conference Programs

7:30 am – 8:30 am Breakfast – **Heritage Ballroom**

7:30 am – 5:00 pm Conference Registration – **Heritage Lobby**

8:30 am – 10:00 am Welcome

**Jeff Thomas**, Chair, Washington Council for Behavioral Health and CEO, Frontier Behavioral Health

**Chris Imhoff**, Director of the Division of Behavioral Health & Recovery, DSHS or a designee

**KEYNOTE ADDRESS** by **Kevin Briggs**, *The Bridge Between Suicide & Life*

SHIP &	RECOVERY & RESILIENCY	INTEGRATION	CULTURAL AWARENESS & DIVERSITY
Supervision	<b>T103 – Alder Room</b> Empathy in Action: How Our Community Created a Peer to Peer Support Program for Youth	<b>T104 – Discovery DE</b> Health Homes Care Coordination & Collaboration with Behavioral Health Agencies	<b>T105 – Hemlock</b> Beyond ACES: Addressing Racism on the Coast
Reducing the Involvement of Persons with Behavioral Health Disorders in the Criminal Justice System through Community-Based Services			
WA's Workforce	<b>T203 – Discovery A</b> The Road to Recovery: Melding Mental & Physical Wellness	<b>T204 – Discovery C</b> Peer Supports: New Roles in Integrated Care	<b>T205 – Alder Room</b> Exploring Opportunities for an Effective and Inclusive Workplace
Part 2	<b>T303 – Discovery DE</b> Ending the Silence for Teens: A Young Adult, Consumer-Driven Approach	<b>T304 – Discovery A</b> Engaging Consumers Across the Continuum of Behavioral Integration	<b>T305 – Pine/Spruce</b> Engaging Diverse Cultural Awareness: Care Provider Perspectives
<b>Ann Washington: An Update – Discovery A (2) The Medicaid Demonstration Project &amp; Supported Employment</b>			
Workshop	<b>F403 – Pine/Spruce</b> Seeking a Life in All the Wrong Places	<b>F404 – Discovery B</b> Integrating Mental Health Care into a Critical Access General Hospital	<b>F405 – Discovery A</b> Wisdom Traditions: A Pathway to Cultural Competence
from the	<b>F503 – Discovery DE</b> Catalyst for Creativity & Courage Playshop	<b>F504 – Discovery A</b> Integrating Behavioral Health & Primary Care for Children & Youth	<b>F505 – Discovery A</b> Techniques for Addressing Systemic Oppression
ment Loan for Your			

**AWARENESS SERVICES & PARTNERSHIPS SERVICES & PARTNERSHIPS**

**Hemlock/Oak**  
 The Impact of  
 Those We Serve

**T106 – Discovery B**  
 An Overview of New Journeys,  
 WA State’s First Episode  
 Psychosis Initiative

**T107 – Discovery C**  
 The Medicaid Demonstration  
 Project & Permanent Supportive  
 Housing

*with Jail Diversion Programs – Heritage Ballroom*

**Alder Room**  
 Opportunities to Create  
 and Diverse

**T206 – Pine/Spruce**  
 Characteristics of Successful  
 Supported Employment Programs

**T207 – Discovery B**  
 Diversion Services in WA:  
 Perspectives from State, Legal &  
 Law Enforcement Communities

**Spruce**  
 Diversity: Social &  
 Awareness for Health  
 Issues in Mental Health

**T306 – Hemlock/Oak**  
 Balancing Our Lives

**T307 – Discovery B**  
 Transition Support: Making  
 Connections & Empowering  
 Clients

**Employment – Discovery B**

**Discovery A**  
 Conditions That Offer a  
 Change

**F406 – Alder Room**  
 The Impact of Male Peer Support  
 in Behavioral Health

**F407 – Hemlock/Oak**  
 Co-Occurring Mental Health &  
 Substance Use Disorders  
 Treatment in Practice

**Discovery C**  
 Working with  
 Depression

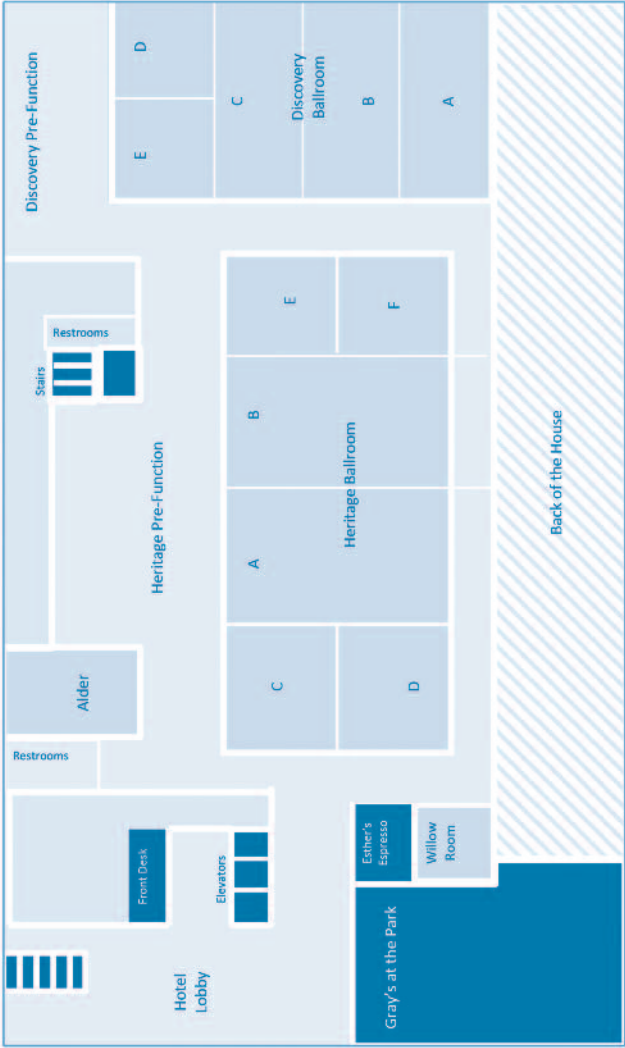
**F506 – Discovery B**  
 Technology & A Stepped Care  
 Approach: CBTp in Community  
 Mental Health

**F507 – Hemlock/Oak**  
 Best Practices in Crisis  
 Intervention & the Use of  
 Response Teams

# HILTON VANCOUVER MAP



2nd Floor Meeting Space



## 3:15 pm – 4:45 pm • Workshops

### **T301 LEAP SW WA: Providing Employment Services in the Clark County Jail** (1.5 CE clock hours) – **Alder Room**

*Anna Lookingbill, MSW, LICSW, MAC, Clark County Sheriff's Office; Dave Cole, WorkSource; Clare Romey, WorkSource*

This workshop highlights the development of a unique job training program located inside a county jail. Funded by the Department of Labor grant "Linking to Employment Activities Prerelease," LEAP will serve a minimum of 100 clients in the 2 year grant period. Through collaboration between Workforce Southwest Washington, WorkSource and the Clark County Sheriff's Office Reentry Program, inmates are directly connected with employment skills and additional support such as chemical dependency treatment, mental health service referral, housing referral, basic needs, and more. LEAP support continues after release, helping clients achieve and maintain education and employment goals. The presenters will discuss the LEAP program structure, eligibility requirements, use of risk assessment, successes and challenges, and steps toward starting an in-custody job training program in your local area.

### **T302 I'm the CEO...Uh, Oh! Part 2** (1.5 CE clock hours) – **Discovery C**

*Joe Roszak, MA, Kitsap Mental Health Services; Wendy A. Sisk, LMHC, MS, Peninsula Behavioral Health; Doug Crandall, Executive Director, Community Psychiatric Clinic*

Nearly a third of current executives (31%) have been on the job for fewer than three years. Alarm at the potential widespread disruption executive turnover might cause has given way to concern about how best to prepare new leaders and their organizations to weather, and even leverage, inevitable transition. Mr. Roszak will lead an interactive panel discussion with new CEOs/Executive Directors to share their path to senior leadership. The discussion will focus on the barriers, supports and challenges that these new leaders encountered along the way. Are you prepared to take the top job? Do you want to be the next CEO? We'll cover skill sets that best served new leaders on their journey to become the head honcho, the rule of karma in becoming a CEO/Executive Director, how being the 'Top Dog' conflicts with self-perception, how lonely it can get at the top, and more!

### **T303 Ending the Silence for Teens: A Young Adult, Consumer-Driven Approach** (1.5 CE clock hours) – **Discovery DE**

*Trez Buckland, PhD, MEd, University of WA School of Nursing; Aislin Percival, NAMI Seattle; Kathy Kaplan, ASN-RN, NAMI Seattle*

The NAMI Ending the Silence program is a free classroom presentation for middle and high school students. The program addresses the reality of living with a mental health condition through the real voices of young adults. They share their stories, challenges, and descriptions of what helps their recovery journey. Key messages include early warning signs, facts about youth and mental health conditions, when, where, and how to get help for themselves or friends, and when it's not ok to keep a secret. Currently, NAMI Seattle is piloting this program in the Seattle School District. This session provides an opportunity to experience this presentation, participate in activities used after a training session to further educate youth, and more.

### **T304 Engaging Consumers Across the Continuum of Behavioral Integration** (1.5 CE clock hours) – *Discovery A*

*Phillip Hawley, PsyD, Yakima Valley Farm Workers Clinic; Brian Sandoval, PsyD, Yakima Valley Farm Workers Clinic; Angelina Thomas, MHA, Yakima Valley Farm Workers Clinic*

Demonstrating value for behavioral care is essential as we move toward full integration and healthcare leaders begin to understand how emotional health impacts an individual's ability to achieve and maintain wellness. Yakima Valley Farm Workers Clinic (YVFWC) offers behavioral health services in primary care and specialty settings, and has begun to align our behavioral health initiatives and workflows to achieve the Quadruple Aim (improved outcomes, lower costs, better patient experience, improved clinician experience). This workshop will illustrate our approach to quality metrics such as Screening, Brief Intervention, and Referral to Treatment (SBIRT), depression screening/follow-up, and behavioral health-related hospitalization among others. We'll demonstrate how effective design of stepped-care workflows, improved system coordination, and interdisciplinary team-based collaboration enhance our ability to match services according to each consumer's needs and motivation. We'll cover how we addressed the growing need for substance use treatment and off-site specialty mental health care, share successes, challenges, and relevant data, and more.

### **T305 Engaging Diversity: Social & Cultural Awareness for Health Care Providers in Mental Health** (1.5 CE clock hours) – *Pine/Spruce*

*Kirsten Wilbur, EdD, OTR/L, University of Puget Sound, School of Occupational Therapy*

In order to function effectively as a health care professional, an individual must value diversity and be able to demonstrate empathy for all clients and families. This means being challenged to continually expand their awareness of others' life situations, life options, and cultural values, and this begins (but does not end) with expanding our awareness of ourselves, our own situations, options, and the cultural values we hold that may be invisible to us. This presentation will lead participants in self-reflection, learning about their own cultural and class backgrounds, seeing how their experience differs from that of others, and encouraging their willingness to accept differences non-judgmentally. Participants come with a wide variety of life experiences and will be encouraged to share them with others. This presentation is just a starting point, and participants will be provided with skills to continue their learning.

### **T306 Balancing Our Lives** (1.5 CE clock hours) – *Hemlock/Oak*

*Kevin Briggs, Pivotal Points*

In this workshop Sergeant Briggs will speak in depth about compassion fatigue, self-care, and balancing our lives. He will talk about his own personal experiences including mental illness, cancer/heart issues and a suicidal son. In the mental health/first responder field, few people acknowledge when they need help and subsequently suffer from compassion fatigue, depression, and/or substance abuse. Sgt. Briggs will shed light on how to effectively communicate with a co-worker in crisis so they can get the help they need and do the job they love.

### **T307 Transition Support: Making Connections & Empowering Clients** (1.5 CE clock hours) – **Discovery B**

*Elizabeth Anderson, MA, LMHC, CHT, Sound Mental Health*

Transition support plays a significant role in assisting those who have been involuntarily detained to make essential connections to community services and successfully returning to their communities. This presentation will take you from the initial development of Sound Mental Health's Transition Support Program in 2014 to our current working model. Attendees will learn about the evidence-based practices demonstrated in the program, how we collaborate with hospital staff, natural supports within the community, community referral partners and providers, and the tools and strategies used to successfully assist our clients in making this transition.

#### **4:45 pm – 5:15 pm • Cracker Barrel Sessions**

##### **Integrated Care Expansion in Washington: An Update** (0.5 CE clock hours available) – **Discovery A**

*Isabel Jones, Health Care Authority; Alice Lind, Health Care Authority*

Washington State is on the pathway to integrated managed care between now and 2020, which means the majority of Medicaid behavioral health services will transition to an integrated model administered with medical benefits by Apple Health MCOs. Southwest Washington and North Central Washington have already adopted this model, and additional regions are considering whether to become “mid-adopters” and move forward in 2019. In this cracker barrel session, come and hear from the Health Care Authority staff who have been on the ground in North Central and Southwest implementing this new financing model. You will hear about the State's timeline between now and 2020, which regions have signed on to move forward next, how you can engage, and what to expect between now and 2020. Are you wondering what's the difference between a BHO and BH-ASO? Are you wondering what the crisis system will look like? What are the options for continued county or BHO roles? You can learn about this and more in this session – come prepared with questions because there will be an interactive q&a!

##### **The Medicaid Demonstration Project & Supported Employment** (0.5 CE clock hours available) – **Discovery B**

*Melodie Pazolt, DSHS Division of Behavioral Health & Recovery; Lisa Bennett-Perry, DSHS Division of Behavioral Health & Recovery*

This cracker barrel will focus on the research and fidelity measures of Evidence-Based Practice Individual Placement & Support (EBP IPS), also known as Supported Employment. It will provide strategies that address employment issues for people living with behavioral health challenges and will address implementation within a Medicaid driven system. This session will also include an update on the 1115 Demonstration that allows Supported Employment services to be Medicaid reimbursable.

#### **5:30 pm – 7:00 pm**

##### **Recovery & Resiliency Roundtable** (CE clock hours not available) – **Hemlock/Oak**

Consumers, youth, and families in Washington State – come share your thoughts about recovery and resiliency efforts with the Division of Behavioral Health & Recovery! Let the Division and the Office of Consumer Partnerships know what you think is working and what needs to change concerning behavioral health programs and services. Join us for an interactive and informative meeting. Refreshments will be provided.

Friday, June 16

7:30 am – 8:30 am • BREAKFAST – *Heritage Ballroom*

Vendor Tables Open



9:00 am – 10:00 am • KEYNOTE ADDRESS  
by **Victoria Maxwell**

**That's Just Crazy Talk** (1 CE clock hour)

*That's Just Crazy Talk* looks at both the light and dark side of living with bipolar disorder, anxiety and psychosis. Endorsed by the Mental Health Commission of Canada, it describes one woman's journey of coming to terms with mental illness within herself and in her family. An intimate, yet universal story exploring the judgment we face not only from others, but from ourselves and the mysteries of family secrets. This funny and achingly truthful play both entertains and

educates, exploding stigmas and portraying the love and resilience it takes to stay together as a family in the midst of illness and the beauty that can result when we face our demons.

10:15 am – 11:45 am • Workshops

**F401 Forensic Mental Health Counseling: Primary Mental Health Providers for the 21st Century** (1.5 CE clock hours) – **Discovery C**

*Sarah Blackburn, MA, LMHCA, WA State Dept. of Corrections Monroe Correctional Complex; Ismael Concepcion Poo, MA, LMHCA, WA State Dept. of Corrections Monroe Correctional Complex*

This presentation will highlight the increase in psychiatric patients in the correctional setting, the need for evidence-based mental health services, and the process from initial psychiatric screening at the Washington Corrections Center to being identified as having a serious mental illness and then transferred and treated at appropriate housing units. Most of these individuals are placed at the Special Offenders Unit (SOU) in Monroe, WA, where our approach seeks to balance safe and secure custodial care with first-class clinical mental health services. In this presentation, SOU staff will lead an interactive discussion on topics including: an overview of correctional inpatient residential treatment in WA State; an introduction to evaluation tools used in correctional mental health; barriers and challenges to conducting and maintaining a therapeutic milieu; therapeutic interventions within a correctional residential unit; and macro and micro data integrity procedures.

**F402 Lessons in Leadership from the Battle of Gettysburg** (1.5 CE clock hours)  
– **Discovery DE**

*Richard Stride, MS, MBA, PsyD, Cascade A Behavioral Healthcare Agency*

This workshop will present lessons in leadership drawn from the Civil War battle that took place July 1st – 3rd, 1863 in and around the town of Gettysburg, PA. In our era of healthcare reform and integration we can learn a lot from the brave men who fought there and the officers leading them. The battleground decisions leaders on both sides chose to make, as well as the ones they did not, turned the tide of the entire Civil War. Their strategic thinking, planning, and quick decision-making abilities are studied and emulated by business leaders to this day. Dr. Stride will cover topics including how leaders at all levels must be able to adapt to their current situation, react quickly as conditions change, and display confidence even when they have doubts. He'll also discuss how the many lessons to be learned from Gettysburg can help leadership teams find their way in our ever-shifting world of integrated care.

**F403 Seeking a Life in All the Wrong Places: Trauma Education & Recovery**  
(1.5 CE clock hours) – **Cedar Room**

*Ann Rider, MSW, Certified Peer Counselor, Capital Recovery Center; Janine Colletta, Certified Peer Counselor, Capital Recovery Center*

Trauma survivors often lack both an understanding of their experience and the skills to manage their overwhelming emotions, and can end up looking for relief in substance abuse and other risky behaviors. Since trauma treatment by credentialed therapists can be hard to find for those enrolled in Medicaid, Capital Recovery Center (CRC) chose a different method of working with trauma survivors. Facilitators will describe CRC's program, including a group that provides information about the effects of trauma and how participants' behavior and coping skills may stem from trauma. It combines education & skills training with approaches from Creating Sanctuary and Seeking Safety, and helps participants implement new coping skills. The presentation will cover how this program was created and implemented, the importance of education about trauma and its impact, resources for trauma survivors, and more.

**F404 Integrating Mental Health Care into a Critical Access General Hospital**  
(1.5 CE clock hours) – **Discovery B**

*Susan Ehrlich, MD, Discovery Behavioral Healthcare/Jefferson Healthcare; Jacqueline Mossakowski, MSN, RN, Jefferson Healthcare; Mary P. Fortman, MSW, LICSW, Jefferson Healthcare*

Our community mental health clinic and local hospital have been experiencing the devastating pressures that other frontier and remote areas have felt due to the worsening dearth of psychiatric inpatient beds. Momentum from an unsuccessful effort to create a local E & T unit led us to an affordable project that involves multiple stakeholders, costs far less than new construction, allows care for our most vulnerable people right in our own community, and has forged a variety of vital community connections. This presentation will describe how we got there, details of the project (including redesigned ER & ACU rooms and nurses trained in evidence-based, recovery-oriented practices), and examples of cooperation between the CMHC, primary care staff, and the hospital. Let our ideas help you make use of local resources rather than simply waiting and hoping for legislative, regulatory, or managed care company rescue.

**F405 Wisdom Traditions That Offer a Pathway to Change (1.5 CE clock hours)**  
**- Discovery A**

*Gretchen Hingley, MS, Dreaming Earth; Vincent Guy Wallulatum, MSW, CADC II, Dreaming Earth*

This session will present an integrated approach to bridging the gap between traditional and indigenous healing practices for counseling Native Americans. Indigenous Wisdom Traditions believe that when the body and mind are out of balance dis-ease occurs. The objective of Wisdom Traditions is to bring the body-mind back to balance. Well-being requires more than a cognitive understanding and knowing; it requires a multidimensional view of wholeness. When we honor our bodies, our mind and our emotional needs, we make space for healing and transformation. Dreaming Earth staff will lead an interactive discussion and experiential activities that will help participants integrate the science of well-being with the lived experience of indigenous healing practices; understand how to access clients' personal medicine; engage the body as part of the learning/healing process; and develop self-discovery tools that link the body and mind.

**F406 The Impact of Male Peer Support in Behavioral Health (1.5 CE clock hours)**  
**- Alder Room**

*Nelson Rascon, MPA, DadsMOVE; Steve Williams, DadsMOVE*

True family and youth voice means engaging the whole family: the child and their siblings, moms, and the often missing ingredient: dads. Bringing the dads into service planning, implementation and evaluation of services completes the family voice. Getting dads equipped to participate in Peer and Parent Supports is an essential part of positive family outcomes in crisis. The presenters will discuss how to encourage positive male involvement, demonstrate the effectiveness of male peer support partners in systems that serve families, how having a child with behavioral or mental health issues uniquely affects fathers, and how participating in DadsMOVE events has helped men gain positive skills by connecting with others who have walked their same road. The two facilitators will guide an open discussion on how peer support has helped them and the positive influence it has had on their families, demonstrating the effective outcomes they've achieved in five years.

**F407 Co-Occurring Mental Health & Substance Use Disorders Treatment in Practice (1.5 CE clock hours) - Hemlock/Oak**

*Andrea Ray, LMHC, CDP, Comprehensive Healthcare; Christina Hodge, MA, LMHCA, Comprehensive Healthcare*

Comprehensive has been providing community behavioral services for over 40 years. In 2012, we opened a site in Pasco to meet a community need to serve individuals with co-occurring mental health and substance use disorders in an outpatient setting by providing services at one location with one integrated treatment team. This presentation will describe the components of this successful program, and address program development, service monitoring, fidelity to evidence-based principles, and program outcomes. We'll cover the treatment model used, which is based on the SAMHSA Integrated Treatment of Co-Occurring Disorders program, as well as the IDDT Fidelity Model, and the process of integrating mental health and chemical dependency professionals with a shared treatment plan for the client. We will also discuss elements of the integrated treatment program, including therapy, case management, medication management and group counseling.

## 11:45 – 12:45 pm • Afternoon Activities

**LUNCH & AWARD PRESENTATIONS** (CE clock hours not available) – **Heritage Ballroom**

### 1:00 pm – 2:30pm • Workshops

#### **F501 Peer to Peer Mentoring Program in the Clark County Jail** (1.5 CE clock hours) – **Alder Room**

*Kelly Anderson, MA, Clark County Sheriff's Office; Cory Fitzgibbon, CVAB Reach Too*

This workshop will highlight the peer mentoring program that resulted from collaboration between Community Voices Are Born's (CVAB) Reach Too program, Community Services NW (CSNW), and the Clark County Sheriff's Office Re Entry program. In 2016 CVAB was awarded a Targeted Capacity Expansion Peer to Peer SAMHSA grant to partner with CSNW and the Clark County Sheriff's Office to develop and implement a peer mentoring program for participants released from the Clark County jail and struggling with substance use issues. The Peer to Peer Mentoring program connects these individuals with CVAB's resources in the community, including housing support, mentoring, employment, educational supports, prosocial activities, and recovery events. Presenters will also cover successes and challenges of the program, and steps toward starting a peer mentoring program in your county jail.

#### **F502 How to Access Government Loan Repayment Programs for Your Clinicians** (1.5 CE clock hours) – **Cedar Room**

*Renee Fullerton, MPH, WA State Dept. of Health; Ciara High, WA Student Achievement Council*

Increasing numbers of behavioral health clinicians now graduate with five and six-figure debt amounts. These clinicians are highly motivated to work at practices where they have a good chance of receiving loan repayment awards. Your understanding of the requirements and processes of the state and federal loan repayment programs can make the difference between signing/retaining your dream candidate and losing them. With recent changes to the requirements for behavioral health sites in the National Health Service Corps and the addition of several behavioral health professions to the Washington State Health Professional Loan Repayment Program, there is much to learn. This session will be most helpful to those employing psychiatrists, psychiatric ARNP/PAs, RNs, clinical psychologists, clinical social workers, mental health counselors and marriage and family therapists in a general mental/behavioral health setting or in DOC/DSHS facilities.

#### **F503 Catalyst for Creativity & Courage Playshop** (1.5 CE clock hours) – **Discovery DE**

*Victoria Maxwell, Crazy for Life Co.*

Calling the shy, the bold, the quiet, the curious: Join Victoria Maxwell in a safe and encouraging environment for an interactive day of perfectly imperfect improv, captivating creative writing and soulful story shaping. The playshop gives a boost to your communication skills, your presence and your confidence in whatever work you do or would like to do, on-line, in person or in front of groups. It's perfect for beginners and professionals. Are you someone who has lived experience of mental health challenges and interested in learning how to share your story of recovery? Are you a loved one or a

professional who supports individuals with mental health issues who wants to become a more confident speaker and advocate? In this hands-on play-shop through sharing and engaging in creativity exercises within a group setting you will cultivate confidence, courage and self-compassion; reduce self-stigma; receive support and validation of the lived experience of mental illness, mental health issues and recovery and of your innate ability to be creative; and walk away with a 1–3 minute rough draft of a fictional or true story monologue or talk which you can develop further or NOT.

**F504 Integrating Behavioral Health & Primary Care for Children & Youth**  
(1.5 CE clock hours) – **Discovery A**

*Sarah Rafton, MSW, WA Chapter of the American Academy of Pediatrics; Francie Chalmers, MD, Skagit Pediatrics LLC; Sterling Chick, MC, Catholic Community Services*

Washington's Pediatric Transforming Clinical Practice Initiative (P-TCPI) is one of only two Practice Transformation networks with a dedicated pediatric focus. A partnership between the WA State Department of Health, Molina Healthcare, and the WA Chapter of the American Academy of Pediatrics, our initiative attempts to harness leading edge innovation efforts to improve health outcomes for the whole child. We support both primary care and behavioral health practices to improve referral pathways, communication, information sharing, and partnership as steps along the path to full payment and clinical integration. We'll share lessons learned by examining two partnerships: Frontier Behavioral Health and Rockwood Clinic in the Spokane area, and Skagit Pediatrics and Catholic Community Services (CCS) in Skagit County.

**F505 Techniques for Working with Systemic Oppression** (1.5 CE clock hours)  
– **Discovery C**

*Dontea' Mitchell-Hunter, MS, LMFTA, Greater Lakes Mental Healthcare; Maiya Bailey, MA, LMHCA, Greater Lakes Mental Healthcare*

All too often, women are silenced or resort to silencing themselves for fear of losing their position, relationship, status, and even their identity. From early stages of development, a woman's mind is flooded with information on how to look, act, talk, and walk in order to be accepted and fit her roles, her place, and her purpose in the life of others. This kind of strain turns into constant doubt, insecurities and fear. This presentation will explore the impacts of systemic oppression in individual and couples therapy. Participants will take away skills in assisting clients to become more accepting of their power and identity, and to gain self-agency as they work to decrease symptoms and increase self-worth during and after treatment. Clinicians will learn how to treat a person holistically by clearly identifying how factors of systemic oppression may affect each client and begin treating clients for more than just mental health symptoms.

**F506 Technology & a Stepped Care Approach: Cognitive Behavioral Therapy for Psychosis (CBTp) in Community Mental Health** (1.5 CE clock hours)  
**- Discovery B**

*Sarah Kopelovich, PhD, University of Washington*

Despite national guidelines recommending Cognitive Behavioral Therapy for psychosis (CBTp) as a standard of care for those with psychotic disorders, fewer than 0.1% of mental health care workers in the US are proficient in the intervention. Investigators at the University of Washington (UW) have implemented a CBTp workforce development initiative that has led to the training of more than 60 clinicians. This presentation will describe efforts to increase CBTp's dissemination, using variants of CBTp in which intensity and dose are stepped up or down based on the client's needs and preference, and a telehealth consultation platform called Project ECHO. The CBTp ECHO Clinic, initiated in January, 2017, connects clinicians with UW expertise in evidence-based care for individuals with psychosis. Preliminary implementation data will be reported on for two large, multi-site community mental health agencies in WA State.

**F507 Best Practices in Crisis Intervention & the Use of Response Teams**  
(1.5 CE clock hours) **- Hemlock/Oak**

*Andy Prisco, DSHS Special Commitment Center; Ken Rains, Eastern State Hospital*

This presentation will highlight the Psychiatric Emergency Response Team's (PERT) concept, mission and organizational role at Eastern State Hospital (ESH), along with successes of the program. The PERT is an interdisciplinary team that provides coverage 15 hours a day year-round for the entire campus at ESH. Within 9 months of PERT implementation, the team successfully reduced seclusion and restraint usage by 60.4 percent. Presenters will describe methods used and how effective communication and empathy can avert many potential psychiatric emergencies. Discussion will include PERT's intent to use less restrictive measures, ensure that mental health crisis interventions are guided by standards consistent with recovery and resilience, and find an approach to mental health crisis that works to reduce the likelihood of future emergencies and produce better outcomes, and more.

## CONTINUING EDUCATION (CE)

Up to **11 hours** of Continuing Education clock hours are available to participants attending the entire conference. Certificates will be issued after the event to participants based on the number of hours they have attended at the conference that are submitted via the CE tracking form. Additional hours are also available through the Law & Ethics and Assessing & Managing Suicide Risk courses (separate registration fees required).

If you need Continuing Education clock hours please pick up a **Continuing Education Tracking Form** at the conference registration desk. This form is intended for use by individuals who need to accrue continuing education (CE) clock hours for the purposes of maintaining professional licensure requirements of the Washington State Department of Health or other professional organizations. **ALL conference participants will be given a certificate of attendance. Only those individuals who need a certificate with the specific number of CE hours obtained should fill out the CE Tracking Form.**

Please fill in your name and contact information. This will be used for the purposes of generating your CE certificate and mailing it to you after the conference. PLEASE PRINT CLEARLY. Check the boxes corresponding to the sessions you attend. **Turn this form in to the Registration Desk upon COMPLETION of all the workshops you have attended.** A certificate will be mailed to you within 3 weeks.

***Please note this tracking form is not intended to incorporate the Law & Ethics or Assessing & Managing Suicide Risk trainings being offered on Wednesday, June 14th. Separate certificates will be issued for those courses.***

The Washington Council for Behavioral Health (formerly the Washington Community Mental Health Council) (600 Stewart Street, Suite 202, Seattle WA 98101, 206-628-4608) has been approved by NBCC as an Approved Continuing Education Provider, ACEP No. 5849. Programs that do not qualify for NBCC credit are clearly identified. The Washington Council for Behavioral Health is solely responsible for all aspects of the programs.

**Please see the registration staff if you have questions regarding continuing education clock hours.**

# SPECIAL RECOGNITION

A very special Thank You is extended to the following organizations and individuals for their participation, hard work, and generous support. Every effort was made to ensure the accuracy of this list up to the time of printing; we regret if some names were not included.

## Conference Speakers and Panelists

As listed in program

## Conference Partners

- DSHS Behavioral Health Administration/ Division of Behavioral Health & Recovery
- Department of Corrections
- Washington Council for Behavioral Health

## Boosters & Exhibitors

- Alcohol & Drug Abuse Institute Clearinghouse
- Amerigroup
- Cascade Behavioral Hospital
- Center for Cognition & Recovery
- Columbia River Mental Health Services
- Coordinated Care
- Correct Care Solutions
- Credible Behavioral Health Software
- Crisis Clinic/WA Recovery Help Line
- Daybreak Youth Services
- Dr. Cloud EHR
- DSHS/Behavioral Health Administration/Division of Behavioral Health & Recovery
- Eastern WA University School of Social Work
- Genoa, a QoL Healthcare Company
- Jet Computer Support
- Millennium Health
- Molina Healthcare WA
- NAMI Washington
- Netsmart
- NorthPoint Recovery
- Northwest University
- Orion Healthcare Technology

- Protocall Services
- Qualifacts
- Qualis Health
- Serenity Lane
- Singing Shaman Traders
- United Healthcare Community Plan

## WA Council Education Committee

- Darcell Slovek-Walker, Chair, Transitional Resources
- Doug Crandall, Catholic Community Services
- Brigitte Folz, Harborview Mental Health Services
- Sonia Handforth-Kome, Valley Cities Counseling & Consultation
- David Nielsen, NEW Alliance Counseling Services
- Faith Richie, Telecare
- Skip Rosenthal, Okanogan Behavioral Health
- Wendy Sisk, Peninsula Behavioral Health
- Richard Stride, Cascade Mental Health Care

## Conference Planners and Advisors

- Alison Avery, Washington Council for Behavioral Health
- Ann Christian, Washington Council for Behavioral Health
- Katharine Buchanan & Andrew Davison, SH Worldwide
- Chris Imhoff, Division of Behavioral Health & Recovery, DSHS
- Karie Rainer, Department of Corrections
- Ronald San Nicolas, Division of Behavioral Health & Recovery, DSHS