



# SUPPORTING RECOVERY IN A CHANGING WORLD

## 2024

Washington Behavioral  
Healthcare Conference  
June 12-14 | Kennewick, Washington



WASHINGTON COUNCIL  
FOR BEHAVIORAL HEALTH

## WHO WE ARE

*The Washington Council for Behavioral Health (WA Council) is the sponsor and organizer of the annual Behavioral Healthcare Conference. Over the past 42 years, the WA Council and its provider members have offered services that 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 partnerships and provides high quality behavioral health care education.*

## PLEASE JOIN US

Welcome to the 34th annual Washington Behavioral Healthcare Conference (WBHC), **Supporting Recovery in a Changing World!** As COVID transitions to the endemic stage and our state and nation face new uncertainties in an election year, the need for behavioral health supports and resiliency is higher than ever. At the same time, there is unprecedented recognition of the vital importance of expanding access to behavioral health care, including community-based treatment and peer support services. The momentum to address structural racism throughout our communities and institutions continues to grow, and new and diverse voices are helping to shape our path forward.

We'll weave these themes together when we meet in Kennewick in June, hearing from community providers, regional and national experts, and people with lived experience to share their wisdom, knowledge, and tools. We're especially excited to introduce the 2024 WBHC keynote speakers:

- **Jeanann Verlee**, a poet and author with lived experience who uses her work to bring awareness to issues surrounding mental health
- **Daniel E. Dawes, JD**, a widely respected healthcare and public health leader, health equity & policy expert, educator, and researcher
- **Ricky Kidd**, a master of resilience who was wrongfully convicted, spent 23 years in prison, and after his exoneration works to help others become resilient in the face of their challenges

This event will highlight 38 sessions; 34 workshops and new this year, 4 TED-style talks. Tracks at the WBHC will focus on recovery & resiliency, race & equity in behavioral health, innovative care practices, services across the lifespan, corrections & mental health, and more.

We gratefully acknowledge support for the WBHC from the Health Care Authority/ Division of Behavioral Health & Recovery, and the Department of Corrections.

Please join us in Kennewick in June for this outstanding educational event!

Sincerely,

**Joan Miller, CEO**  
Washington Council for  
Behavioral Health

**Kim Zacher, Chair**  
Washington Council for  
Behavioral Health and  
CEO, Comprehensive Life  
Resources

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



# LAW & ETHICS – VIRTUAL

TUESDAY, JUNE 4 & WEDNESDAY, JUNE 5

Law & Ethics will be presented in **2 virtual sessions**, as described below. You must attend **BOTH sessions in their entirety** to receive the **6 CE clock hours**; the **\$190 registration fee for Law & Ethics includes both sessions**.

## **Washington State Law & Ethics for Behavioral Health Professionals**

(6.0 CE clock hours) (additional \$190 registration fee required)

*Eric Ström, JD, PhD, LMHC, Ström Consulting*

*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 CE clock hours will be emailed to attendees who attend both sessions in their entirety.***

### **Session 1, Tuesday June 4, 2024, 9 am – 12:15 pm: Law & Ethics of Clinical Relationships & Boundaries**

Relationship boundary violations are the most common basis for findings of professional misconduct against behavioral health professionals. There are a wide range of ways clinicians and clients may find themselves in dual relationships. In this three-hour workshop, we will examine the applicable ethical standards and Washington State laws regarding dual and personal relationships with clients and discuss a range of case studies based on recent Washington Department of Health discipline decisions. We will also discuss strategies for implementing, and maintaining, appropriate client/clinician boundaries.

Participants will gain an increased ability to implement strategies to maximize clinical effectiveness and minimize liability risk; apply legal guidelines regarding dual relationships; apply ethical standards regarding personal relationships with clients; describe the range and types of inconsistent dual relationships; identify risk factors for personal relationships with clients; and create and evaluate strategies to maintain appropriate clinical relationships.

### **Session 2, Wednesday June 5, 2024, 9 am – 12:15 pm: Law & Ethics of Court Involvement**

Balancing the protection of client confidentiality against compliance with subpoenas and court orders can be both challenging and stress-inducing for many clinicians. An effective understanding of the legal and ethical requirements regarding confidentiality, subpoenas, client advocacy and in-court testimony is vital to effective clinical work and is a key part of sound professional practice. In this three-hour workshop, we will examine legal and ethical standards regarding releasing client information within the legal system. We will also discuss best-practices to support effective clinical work with clients while minimizing exposure to liability.

Participants will gain an increased ability to locate and describe legal standards relating to confidentiality of healthcare information; describe the difference between confidentiality and legal privilege; identify and apply Federal and Washington State legal standards relating to subpoenas; create and evaluate strategies to for in court testimony and advocacy to best support effective work with clients; and apply best practice standards to responding to subpoenas and other court orders.

## Wednesday Pre-Conference Activities, June 12

### Subject to Change

Location: Three Rivers Convention Center

8:00 am – 5:00 pm

Pre-Conference Programs

## Wednesday Conference Activities

Noon – 6:30 pm

Registration Open

Location: Three Rivers Convention Center

4:30 pm – 6:30 pm

### Welcome Reception

(CE clock hours not available)

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

## Thursday, June 13

7:30 am – 5:00 pm

Registration & Vendor Tables Open

Location: Three Rivers Convention Center

7:30 am – 8:30 am • Breakfast

8:30 am – 10:00 am • Welcome

**Kim Zacher**, Chair, Washington Council for Behavioral Health and CEO, Comprehensive Life Resources

**Michael Langer**, Interim Director, Division of Behavioral Health & Recovery, Health Care Authority, or a designee

**KEYNOTE ADDRESS** by **Jeanann Verlee**, Poet, Essayist, Editor & Former Punk Rocker



### **Speaking the Unspeakable: Defying Stigma through Poetry & Storytelling**

(1 CE clock hour)

Jeanann Verlee is a poet, essayist, editor, and former punk rocker. The

author of three books: *prey*, *Said the Manic to the Muse*, and award-winning *Racing Hummingbirds*, she performs and facilitates workshops at universities, theatres, libraries, bookstores, and dive bars across North America. Verlee is a survivor of psychological, physical, and sexual trauma who lives with bipolar disorder, complex PTSD, chronic generalized anxiety, and autoimmune disease. She explores these themes in her work, using her lived experience to illuminate trauma and destigmatize mental illness. Her keynote address invites us to challenge stigma by defying shame and silence. Incorporating poetry, memoir,

essay, and personal anecdotes, she will illustrate the impact of storytelling as a form of advocacy. Verlee has received a National Endowment for the Arts Creative Writing Fellowship and has been featured on PBS Newshour's *Brief But Spectacular*, The Lincoln Center's *Musing(s): Poetry as Therapy*, and PEN America's *Out Loud: Madness and Mania*. Join us for a dynamic exploration of narrative arts for social change.

10:15 am – 11:45 am • Workshops

### **T101 When Time-Outs Don't Work: Creating a Culture of Accountability During Incarceration** (1.5 CE clock hours)

*Jessica Krumins, PhD, MS, WA Department of Corrections; Olivia Scott, MSW, LSWAIC, WA Department of Corrections*

This interactive workshop offers attendees the opportunity to reflect on the role of prison in society and to consider how to create a culture of accountability. A common cultural complaint is that people are not held accountable any longer – sentences are shorter and releases come earlier. Yet incarceration itself is not accountability; accountability strengthens relationships and community whereas incarceration isolates people. This session reviews recent research on shame, connection, and restorative justice, and explores how these concepts can be used to build crucial interpersonal skills. The opportunity to both teach and practice accountability is available to everyone, both in the community and in DOC. We'll encourage attendees to grapple with these topics and explore questions related to accountability and the role of prison in society. Facilitators will share their own journeys of unlearning, learning and holding themselves and others accountable in order to decrease recidivism and improve the overall culture and experience of both incarcerated individuals and staff members.

### **T102 Peer Support in Washington - Creating the Profession of Certified Peer Specialist** (1.5 CE clock hours)

*Shelly Shor, PhD, Health Care Authority; Maureen Bailey, Health Care Authority; Ted Dale, WA Department of Health*

The passage of SB 5555 created a new, independent professional credential for peer counselors - the Certified Peer Specialist. With a myriad of changes coming to the peer profession and certification process, this session will communicate these changes to the public and to those most impacted by them in the behavioral health workforce. In this presentation, we'll talk about the history and current application of peer support in Washington, including an overview of the core principles, history of peer services, current and past training, and the certification processes. We'll also share information about the potential shift recent legislation will pose to the peer profession and certification over the next 3 years. As the Department of Health (DOH) is continuously working with stakeholders, partners and interested parties in developing this credential for implementation, we'll share the process and timelines for establishing the new credential as outlined by the bill and invite the audience to get involved in this ongoing process.

### **T103 Promising Outcomes for Certified Community Behavioral Health Clinics (CCBHCs)** (1.5 CE clock hours)

*Natalie McGillen, MS, LCPC, Comprehensive Healthcare; Abby Harnett, MSW, LCSW, Comprehensive Healthcare*

CCBHCs are designed to provide a comprehensive range of behavioral health and substance use disorder services to the most vulnerable and underserved populations. CCBHCs must be able to ensure access, provide 24/7 crisis care, meet stringent criteria for

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quality reporting, staffing and coordination of care. CCBHCs also have to understand the real cost of providing and expanding services to fully meet the need for care in our communities. This session will share Comprehensive Healthcare's journey to become a CCBHC. Through multiple CCBHC SAMHSA grant opportunities and working with the state on long term service and sustainability options, we have been able to meet the criteria to provide integrated care, understand our costs, and build care coordination agreements with community partners that ultimately will provide a whole health approach for individual care. Join us to learn more about how we did it and about CCBHC grant opportunities.

**T104 Over the Rainbow: Best Practices for Working with Sexual & Gender Diverse (SGD) Midlife & Older Adults** (1.5 CE clock hours)

*Charles Hoy-Ellis, PhD, MSW, LICSW, The Goldsen Institute, University of WA School of Social Work; Jessica Sowa, MSW, The Goldsen Institute, University of WA School of Social Work*

Sexual and gender diverse (SGD) older adults (also characterized as LGBTQ+) are underserved and experience significant health disparities, including significantly greater risk for mental health issues, such as depression; chronic health conditions, such as cardiovascular disease and disability; and loneliness and social isolation. Through our Aging with Pride: National Health, Aging, and Sexuality/Gender Study (NHAS), the Goldsen Institute has been in the forefront of conducting research to identify underlying mechanisms of risk and protective factors that contribute to health disparities, as well as factors that foster resilience among SGD older adults. This session will highlight sociocultural and historical contexts that have and continue to shape the lives, experiences, and key health outcomes of today's – and tomorrow's – SGD older adults. We'll provide an overview of some of the innovative interventions and community-based training & support programs designed, developed, and implemented by the Goldsen Institute. We'll also cover key strategies that can be directly transferred and/or adapted to a wide variety of care provision services and settings.

**T105 The Re-Indigenization of Motivational Interviewing: Finding the Roots of Integrity** (1.5 CE clock hours)

*Christina Clayton, MSW, LICSW, SUDP, University of WA School of Social Work & School of Medicine, Dept. of Psychiatry; Lonnie Nelson, PhD, Washington State University, Partnerships for Native Health & IREACH; Aaron Fast, Suquamish Tribe Wellness Center*

Motivational Interviewing (MI) is a way of being with clients and relatives that facilitates the exploration of their experience and thoughts around behavior change, with the intention of helping them to make the best decisions for their life and health. MI has a spirit with foundations in Native/Indigenous cultures, which can be overlooked in traditional MI training. The Northwest Mental Health Technology Transfer Center (MHTTC) works with Dr. Lonnie Nelson at Partnerships for Native Health at WSU to offer training on Indigenized MI, developed specifically for Native-serving organizations. Our session will describe our training efforts and highlight key differences between Indigenized MI training and westernized MI. We'll recognize the legacies of colonialization in Native cultures & perceptions of "problematic" behaviors; discover the roots of Indigenous/Native foundations of MI; and describe the role of integrity & wholeness in Indigenized MI. Indigenized MI training has been delivered to both urban and reservation-based organizations over many years, and evaluations demonstrate that these specific MI trainings help them feel more prepared to serve Native communities. Join us to learn more!

**T106 Meeting Our Clients Where They Are** (1.5 CE clock hours)

*Elizabeth Kimble, MA, Wahkiakum County Health & Human Services; Pam Hongel, BS, Wahkiakum County Health & Human Services; Richie Allen, Wahkiakum County Health & Human Services*

What does it really mean to say "meet the client where they are at"? Many services and agencies devote themselves to supporting clients' access to behavioral health services, but what does this look like from the client's perspective? When we talk about cultural humility and equity, do we understand this in the context of poverty in rural cultures? When we refer clients to resources such as Medicaid transportation, do we have a realistic expectation of what that client's experience is going to be? Let's explore a client's-eye-view of behavioral health services in a small, rural county where resources are fewer and operate differently, and services are delivered more creatively. This interactive session will take attendees through experiences generated from actual experiences of people our agency has served, requiring finding solutions to attendance challenges using only resources that are currently available in our county. We'll wrap things up with a discussion of how our tiny, county-run community-mental health center has adapted to better connect our population.

**T107 Lend Me Your Ear! How to Communicate with Your Local & State Legislators** (1.5 CE clock hours)

*Julia O'Connor, MSW, WA Council for Behavioral Health; Olivia Shangrow, JD, WA Council for Behavioral Health*

Navigating policy and politics can be intimidating and our elected officials can feel distant or hard to reach. This session aims to demonstrate the many ways that you can show up as an advocate for your community. Presenters will provide concrete examples of how to navigate both state and federal levels of government, as well as how to prepare statements on important issues. Demonstrations will include creating an elevator pitch to present to a legislator, developing public comment or testimony on proposed bills, and highlighting the various methods for identifying and contacting key stakeholders. Our goal is for you to come away with a renewed sense of empowerment and confidence in your ability to connect with policy makers to elicit change.

**11:45 – 12:30 pm • Lunch**

**12:30 – 1:30 pm**



**KEYNOTE ADDRESS by Daniel E. Dawes, JD**, Senior Vice President, Global Health; Executive Director, Global Health Equity Institute, Meharry Medical College

**Leveraging the New Determinants of Health to Improve Patient Outcomes** (1 CE clock hour)

As a passionate advocate for underserved communities, Daniel Dawes has become a national thought leader on utilizing data on the social determinants of health to identify and eliminate healthcare disparities. But how can we also use data to reduce costs and improve outcomes for every single group and in every community? Dawes looks beyond social determinants to examine how the behavioral, community – even political – determinants of health can decrease the risk factors

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behind the poor health pandemic. In this dynamic presentation for healthcare and mental healthcare providers, employers, community leaders, policy makers and others, Dawes looks at the multiple factors affecting health and takes audience members further upstream to understand the root causes of disparities and how we can effectively disrupt the silos and engage in strategic partnerships to advance a more healthy, equitable and inclusive health system. It all begins with asking the right questions: Is a patient caring for a loved one and not taking care of herself? Depressed? Obese? Lonely? Are we effectively collecting, utilizing, and prioritizing the comprehensive data to identify these and other issues? Providing real life examples, he challenges audiences to look at both determinants and data in a whole new way. He also provides practical applications that they can immediately put into action.

## 1:45 pm – 3:15 pm • Workshops

### **T201 Gender Affirming Care for Transgender & Intersex Individuals in a Corrections Setting** (1.5 CE clock hours)

*Melisa Holdway, MA, WA Department of Corrections; Nathaniel Burt, PhD, WA Department of Corrections*

Join us for an overview of affirmative and gender responsive services for incarcerated transgender and intersex individuals in Washington. Research has shown that these individuals often experience stigma and discrimination which can negatively influence their mental health, and affirmative and responsive care has been associated with improved long-term outcomes. Presenters will discuss how treatment and service delivery is being adjusted to meet the needs of this population. Our current treatment approaches are based on evidence-based treatment modalities that address culturally specific need areas, including trauma, shame, depression, self-harm, violence, sexuality, medical treatment concerns, and societal stigma. We'll share information on treatment adaptations, including coordinating and integrating services across disciplines and addressing responsibility needs related to gender identity. Presenters will also cover barriers to gender affirmative care, share information on providing appropriate and responsive adjustments in the areas of assessment, treatment, productive and effective staff communication, and more.

### **T202 Operationalizing Peer Support** (1.5 CE clock hours)

*Naomi Herrera, MA, Health Care Authority*

This workshop explores the operationalization of peer support in Washington. Peer support, an evidenced-based practice, can significantly contribute to improving overall recovery and well-being of those receiving peer services. The integration of peer support programs into new or existing systems often faces challenges due to various barriers, biases, and/or misunderstandings around what peer roles are and are not. This workshop will address these challenges by providing participants with practical strategies and best practices on how to implement, sustain, and enhance effective peer support programs. Attendees will have the opportunity to engage in interactive discussions, best practice and lived experience sharing. We'll equip participants with the necessary tools and knowledge to effectively integrate peer support into their respective organizations, ultimately contributing to the transformational changes needed in Washington's behavioral health system.

### **T203 Washington's Coordinated Specialty Care for Early Psychosis: Exploration & Expansion of the New Journeys Model** (1.5 CE clock hours)

*Sheldon Stokes, BA, Washington State University; Enos A. Mbajah, MA, Health Care Authority; Maria Monroe-DeVita, PhD, University of WA SPIRIT Lab*

This presentation will provide information, resources, and data on Washington's New Journeys early intervention model for treating people experiencing first episode psychosis (FEP) in order to guide audience participants toward a better understanding of this model, its intervention components, and how providers can incorporate components of the model into existing care. This interdisciplinary team-based model includes interventions like Family Education & Support, Individual Resiliency Training, Psychopharmacological Treatment & Medication Management, Supported Employment & Education, Peer Support, and more. Presenters will cover early signs of psychosis and the importance of building early intervention services to address the needs of people experiencing FEP. We'll also report on the 2023 evaluation findings and implications for future program development and implementation, including the development of new innovations within the current New Journeys model.

### **T204 Integrating Mental Health & SUD Treatment into School-Based Systems: Upstream Interventions for Comprehensive Youth & Adolescent Wellness** (1.5 CE clock hours)

*Justin Johnson, MSW, LICSW, MHP, Spokane County Community Services Department; Joshua Henderson, MS, LMHC, MHP, Spokane County Community Services Department; Kateryna Rice, MA, Spokane County Community Services Department*

The Initiative for Student Wellness (ISW) School-Based Screening, Brief Intervention, and Referral to Treatment (SB-SBIRT) is a comprehensive and innovative behavioral health intervention for youth and adolescents through school-based systems, identifying social, emotional, and behavioral health challenges that impact them. ISW uses an evidence-based universal screening survey taken electronically to provide a real-time snapshot of the supports, needs, and challenges facing middle- and high-school-aged youth. All students identified by the survey as needing additional help or requesting follow-up are provided immediate access to a licensed behavioral health clinician for mental health services regardless of insurance or ability to pay. In this session, you'll learn how ISW incorporates the SB-SBIRT modality within a school-based system, how ISW partners with existing support within schools to enhance available services, and how Spokane County seeks to ensure equitable access and change the approach to youth behavioral health treatment, recognizing the importance of preventative treatment while ensuring critical treatment services meet the immediate mental health needs.

### **T205 Hidden Cry for Help: Addressing Suicide Ideation & Completion among Latinx Adolescents in Washington** (1.5 CE clock hours)

*Emely Diaz Barragan, MSW, University of WA Latino Center for Health; Gino Aisenberg, PhD, MSW, University of WA Latino Center for Health*

Latinx adolescents are at heightened risk for suicidal ideation and completion. This presentation highlights a hidden cry for help among Latinx adolescents through a literature review and data from multiple sources. While suicide is the third leading cause of death among young people in the US, Latinx youth manifest an

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upward trend in suicide ideation and completion. Understanding sociocultural factors such as migration, acculturative stress, and cultural and ecological factors are important elements in addressing Latinx adolescent suicide attempts and culturally responsive care. This presentation focuses on strategies to address the 72.1% of Latinx adolescents experiencing suicidal ideation, deepens the understanding of the prevalence of Latinx adolescent suicidal ideation in WA state, identifies gaps regarding suicide prevention for Latinx adolescents, and provides culturally responsive recommendations.

**T206 Healthy Boundaries – The Path to Supporting a Successful Peer Workforce** (1.5 CE clock hours)

*Megan Flemings, Crisis Connections*

The movement of peer workers into traditional behavioral health settings presents a chance to grow a more supportive and well-rounded workplace for all employees. New perspectives and ideas can lead to the enrichment of staff and clients and increase the effectiveness of integrated care techniques. But how do organizations keep their peers and support ongoing recovery? Megan will discuss how systemic and organizational practices can create barriers in a peer's ability to integrate into clinical teams successfully. Peers can provide an indication of gaps in staff support and places where organizations can adapt to a changing behavioral health landscape. In a time when we are dealing with a huge staffing shortage in behavioral health and unprecedented burn out rates, changes made that support peer workers are changes that support all staff. Megan will use her experience as both a peer and a manager to discuss obstacles that can get in the way of healthy boundaries in the workplace and small things that can support longevity for all. Attendees will leave with practical implementations that organizations and individual staff can utilize to improve wellbeing in the workplace.

**T207 Washington Health Corps Loan Repayment Program** (1.5 CE clock hours)

*Sarah Alkurdi, PhD, WA Student Achievement Council; Luis Zepeda-Chavez, WA Student Achievement Council*

Washington Health Corps (WHC) is dedicated to addressing critical health care access and delivery in shortage areas across Washington by assisting health care professionals with their educational loans. By reducing or eliminating providers' eligible educational debt through loan repayment of up to \$75,000, providers commit to providing health care services for three years at an approved health site. With recent investment in behavioral health, we're here to increase awareness of these programs. This presentation will describe the history of the programs and what they offer to behavioral health providers. We'll discuss the eligibility criteria for both the health provider applicant and the health site, the responsibility of the employer, and the benefits. We'll also cover the application process, what's needed to apply, and more!

**3:30 pm – 5:00 pm • Workshops**

**T301 EMDR in Corrections: Healing Cultural and Identity Trauma** (1.5 CE clock hours)

*Jared Williams, MA, WA Department of Corrections*

EMDR is an evidence-based intervention for trauma, utilizing a structured step-by-step approach to treat what an individual experiences as traumatic, regardless of a DSM diagnosis or social acceptance of what constitutes a "trauma." EMDR is especially useful in corrections because most incarcerated individuals have

experienced multiple traumas, contributing to their incarceration. EMDR is well-equipped to bring the patients' lived experiences to the forefront of treatment, emphasizing their own internal meanings to heal from trauma. It focuses on helping patients identify the underlying traumatic experiences that are causing current challenges, and resolving the experiences by connecting positive experiences and insights the patient generates themselves. Ways to implement EMDR in the prison setting will be discussed, including individual and group treatment, as well as using brief symptom measures to assess recovery and quality of care.

**T302 A Mom & Her Daughter's Journey of Loss, Trauma, Mental Health, Addiction & Recovery** (1.5 CE clock hours)

*Charlette Lumby, RN, CCRN, Incite Agency for Change; Jordyn Lumby, CPC, SUDPT, Pierce County Alliance*

This session will share multi-generational lived experience around the intersections of intra-uterine trauma, generational trauma, suicide loss & survival, and substance use & recovery. Becoming a widow to suicide and giving birth a week later, my child needing open heart surgery at 13 and then struggling with mental health, addiction, and compounding trauma - none of that was in my plans. I was educated and informed - an ICU and Injury Prevention Nurse teaching suicide and substance use prevention out in communities. And I still didn't see it coming. A child struggling with a substance use disorder and mental health didn't easily fit into the "medical" world. Systemic change, societal acceptance, empathy, and healing begin by breaking the silence. In this session I will share lived experience of suicide loss throughout my and my daughter's lives, how to hold hope, effects of generational trauma, learned lessons, and recovery. My daughter, now 21, will also share her lived experience journey around mental health, substance use, and recovery.

**T303 Harm Reduction Peer Support Group at Harborview Medical Center** (1.5 CE clock hours)

*Jac Dufresne, Peer Support Specialist, Harborview Medical Center; Jade Park, Peer Support Specialist, Harborview Medical Center*

Harm reduction is rapidly being implemented as an evidence-based strategy to support people who use substances. At Harborview Medical Center, Peer Support Specialists Jade Park and Jac Dufresne have developed a harm reduction-focused peer support group to leverage the inpatient experience to support peers in identifying the quality of life they want. Covering topics ranging from safer use strategies, stigma, community resources and more, Jade and Jac have developed a safe space for people to explore what they want from life, whether they choose to continue using or not. Jade and Jac will discuss the research related to harm reduction and peer support and will also explore the challenges they face in implementing harm reduction on inpatient psychiatry. They will also share their group format and leave time for Q&A.

**T304 Virtual Intensive Engagement Wraparound (VIEW)** (1.5 CE clock hours)

*Scott Swan, MS, Molina Healthcare of WA; Kevin Riffel, MA, LMHC, Excelsior Wellness Center; Suzanne Cardenas, MA, Excelsior Wellness Center*

The Virtual Intensive Engagement Wraparound Program (VIEW) is at the forefront of pioneering telehealth initiatives, revolutionizing the delivery of Wellness Recovery Action Plan

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(WRAP) services to youth and families throughout Washington. This innovative program leverages telehealth technology to provide comprehensive WRAP services remotely, offering an efficient and accessible solution within a virtual care model. Participants in VIEW, spanning ages 0 to 20, enjoy immediate access to a dedicated care team providing a diverse range of services. This includes certified peer support for youth and family/caregiver, care coordination, mental health counseling, psychiatric evaluation, medication management, and more – all delivered via telehealth. Come learn more about how this program sets new standards for telehealth-driven mental health care and can help reduce barriers for youth experiencing health disparities.

**T305 Do You See Me? Moving from Tolerance to Acceptance**  
(1.5 CE clock hours)

*Sherronda Jamerson, MA, Harborview Medical Center & Addiction Services*

Unconscious or unspoken racism compromises clinical discussions and outcomes. Learning to listen for clues and skillfully bring up race are opportunities to connect meaningfully with your clients of color and provide them with the high quality of care they deserve. It also aids in creating a safe environment where clients can be seen fully, as they are, without pretense. People of color traditionally don't feel welcomed and tend to avoid mainstream clinical resources, and consequently are unable to access much needed, sometimes critical resources. As a non-topic in therapy, it inhibits and deters authentic communication and inhibits therapeutic connections. This session will raise attendees' awareness of how unconscious or unspoken racism can compromise clinical discussions and outcomes, help them create a safe environment where clients can be seen fully, and decrease harm to marginalized communities.

**T306 Improving Population Health Using Emergency Department & Inpatient Data** (1.5 CE clock hours)

*Ginger Banded, Mission Driven Data; Terra Rea, PsyD, King County Behavioral Health & Recovery Division; Naveen Shetty, MPH, King County Behavioral Health & Recovery Division*

For the past several years, leaders from the King County Behavioral Health & Research Division (BHRD) have been collaborating to improve care coordination between the hospital system and community providers. A cross-agency group meets semi-monthly to look for opportunities that could be implemented across the system, and the group has developed a shared data structure, making it possible to identify trends across different populations. Presenters will share strategies used to increase buy-in, sustain engagement, and move into an action-oriented culture. They'll share examples of these data tools and how they are being used to identify gaps, improve policies, and impact individual care coordination directly. These data tools reveal information about people who are struggling in our system and point to how we might better help. This isn't data for 'data people' only - it's data for the people! Come be inspired to think about how the information you already have could make a difference for the individuals you serve.

## T307 TED-Style Talks

**T307 (A) Effective Storytelling as a Peer Support Counselor**  
(0.25 CE clock hours)

*Jade Amethyst, Valley Cities Behavioral Health*

Storytelling has long been recognized as a powerful tool for communication and connection. As a peer support counselor, it's essential to effectively share our own personal stories to create a safe and supportive environment for those who seek our help. This presentation will highlight the key elements of effective storytelling, including authenticity, vulnerability, and empathy. By sharing our own lived experiences in a thoughtful and intentional way, we can build trust and rapport with our clients, making it easier for them to open up and share their own stories. Furthermore, effective storytelling allows us to convey important messages, provide hope and inspiration, and help clients feel less alone in their struggles. Learn about tips and strategies for incorporating storytelling into our counseling practice, ultimately enhancing the effectiveness of our support and making a positive impact on the lives of our clients.

**T307 (B) Washington Support After Suicide Program** (0.25 CE clock hours)

*Amira Fitzgerald, BS, Crisis Connections*

Suicide loss can have a lasting negative impact on those who are left behind. Survivors often end up disconnected from themselves and others, at risk for early death or suicide. Amira will share her lived experience of losing multiple loved ones to suicide, starting at the age of 11. Through her own struggles with suicidal ideation made worse by isolation from family and peers, she shares what helped pull her out of the deep depression she fell into after so many hard losses. Now, Amira has taken on the role of Support After Suicide Coordinator with Crisis Connections, where she's able to utilize her lived experience with the pain of suicide loss to help others who are struggling with similar losses in their lives. Attendees will learn ways to help non suicide loss survivors (SLS) understand the burden SLS carry with them after a loss, teach people how to talk to SLS about their loss, and reduce the stigma and ostracization of SLS.

**T307 (C) Where there is hope...** (0.25 CE clock hours)

*Jerry Blackburn, MEd, SUDP, Empower Youth Network/Seattle University*

In 1993, at the age of 27, I found myself at the end of a dark journey of decompensation resulting from substance use disorders. And yet, despite this desperate place, I found myself able to ask for help. I was admitted to a detox center where a young woman, without knowing it, shared with me the greatest gift I would ever receive, the possibility that my life could be different. At its core, hope is the belief that our future can be better than our past and that we play a role in making it so. It differs from optimism, which is about expecting good things, not participating in their construction. Hope is about how we plan and act to achieve. As a future facing, goal-oriented model, hope allows us to feel empowered and competent in our ability to walk forward and thrive.



### **T307 (D) What Each Person Can Do to Address the Addiction Epidemic** (0.25 CE clock hours)

*Michele Gerber, PhD, Benton Franklin Recovery Coalition*

Substance Use Disorder (SUD) today touches almost every American. On the front lines are those in active addiction and their families, while persons in their workplaces, schools, neighborhoods and faith communities are likewise affected. Elected officials and law enforcement agencies are besieged with questions about how they are going to deal with the SUD epidemic and its financial and social costs. People need practical, real-world actions and steps they can take in their own environments to fight back against this public health crisis. They also need pragmatic community education to understand SUD and assuage their fears about the epidemic. This presentation offers feasible, useful, achievable steps that can be taken by families, schools, employers, elected officials, and faith communities to strengthen the belief that the SUD epidemic can be managed and healed.

**5:00 pm – 5:30 pm**

#### **QUICK TAKE SESSION(S)**

(Session(s) will be announced on-site)

**5:30 pm – 7:00 pm**

#### **PEER SUPPORT RECEPTION** (CE clock hours not available)

The Division of Behavioral Health and Recovery - Peer Support Program and Office of Community Voices and Empowerment is pleased to invite certified Peer counselors and those interested in becoming certified Peers to an evening reception as well as the Peer of the Year award ceremony! This will provide a great opportunity to network with other Peers, offer input to DBHR regarding your experiences with Peer support, and to celebrate the life-changing services Peers provide across Washington State. Refreshments will be provided; we hope to see you there!

## **Friday, June 14**

**7:30 am – 9:00 am**

Breakfast & Vendor Tables Open

**9:00 am – 10:00 am**



**KEYNOTE ADDRESS** by **Ricky Kidd**, Speaker, Author, Playwright

**Resilience Ready** (1 CE clock hour)

In a world where everyone finds increased difficulty and challenges daily, it's no surprise to hear the word "Resilience." But here's the

thing: Do you really know what resilience is? Do you naturally know how to activate your own, when needed the most? In this powerful presentation of "Resilience Ready," Ricky walks you through the intimate details of his 23-year wrongful conviction, and how he discovered the five keys to activating his resilience, while also helping you understand how to activate your own. You'll learn how to be prepared for the storm that will inevitably come your way and always be Resilience Ready.

## **10:15 am – 11:45 am • Workshops**

### **F401 Transgender Incarcerated Individuals: Their Experience, What is Being Done to Help, & What Can Still be Done** (1.5 CE clock hours)

*Jamie Davis, MA, LMHC, Department of Corrections; Josh Long, MA, LMHC, Department of Corrections*

As most of the facilities within the DOC are male facilities, our transgender population has a very unique experience within this system. Among their many unique challenges, our transgender individuals are faced with decisions such as whether to come out within this setting and if identified as transgender where they can be successfully housed. The presenters will discuss some of the unique housing issues faced by these individuals in the DOC setting, and share information on expanded resources now available, including hair removal, hormone therapy, and various surgery options that would be available out in the community. The presenters will also discuss the support being offered to DOC's transgender population, including how to access these services, how to navigate issues that arise, and providing emotional and mental health support. They will also cover how they've helped some transgender individuals overcome challenges while incarcerated, how some have been successful in maintaining housing and navigating the resources available, and share resources they've found useful.

### **F402 Peer Support & Mindfulness at Harborview Medical Center** (1.5 CE clock hours)

*Jac Dufresne, Peer Support Specialist, Harborview Medical Center; Jade Park, Peer Support Specialist, Harborview Medical Center; Jeremy Elkon, Peer Support Specialist, Harborview Medical Center*

Mindfulness is growing in popularity within behavioral health, but have you met anyone who has actually benefitted from it? Peer Support Specialists Jade Park, Jac Dufresne, and Jeremy Elkon will speak from lived experience about how various mindfulness strategies have transformed their lives and recoveries in profound ways. They will also share how they are introducing these practices to peer consumers at Harborview Medical Center through peer support groups. Using a non-coercive, trauma-informed approach, Peer Supporters who explore mindfulness in groups or one-on-one sessions can aid their peers in coming back to safe contact with their minds and bodies, facilitating healing and connectedness. Done within the context of a group, mindfulness can be particularly helpful for building safety with others. Jade, Jac, and Jeremy will demonstrate how sound healing, qigong, and tea ceremony can be introduced to both an inpatient psychiatric setting and the community mental health setting.

### **F403 A Client-Centered Approach to Engagement & Recovery through Enhanced Illness Management & Recovery (E-IMR)** (1.5 CE clock hours)

*Michelle McDonald-Lopez, MA, LMHC, University of Washington SPIRIT Lab; Andre Stickney, MA, University of Washington*

E-IMR is an engagement tool that can be utilized by Peer and/or BA level clinicians in a person-centered way. It's an evidenced-based practice (EBP) that is module based and can be implemented in a non-linear fashion in an individual or group setting. Also, this EBP utilizes other EBPs to increase its effectiveness. E-IMR can be provided in a vast array of settings including outpatient, inpatient, and residential settings, and any of

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the topics, such as psychoeducation and practical information about their diagnosis, can be used to help a client identify what recovery means to them. Presenters will discuss the basics of E-IMR, utilization as an engagement tool, how to implement it in a group or individual setting, explore the benefits of implementing E-IMR with real life feedback, and its benefits in preparing a client to work with a mental health professional on more advanced psychiatric concerns.

#### **F404 Linking Arms Across Systems to Support the Mental Health of WA Kids & Families** (1.5 CE clock hours)

*Gina Cabiddu, MSW, Kids Mental Health Pierce County; Meghan Hopkins, MA, LMHC, Kids Mental Health Pierce County; Edward Michael, MS, Health Care Authority*

In this session, we will cover a recognized best-practice model for addressing Washington's youth mental health crisis. Kids Mental Health Pierce County, the Health Care Authority, and Developmental Disabilities Administration are expanding the Youth Regional Behavioral Health Navigator program across the state. Presenters will highlight the success of this collaborative, community-based model that is transforming systemic interactions, organizational policies, and the experience youth and families have when accessing mental health supports. By bringing the community into youth behavioral health, families, children, and systems have improved outcomes, coordination, and access to the care continuum. We will review the YRBHN model's three components: a regional website of resources and information, local steering and action committees, and multi-disciplinary team gatherings that brings the community to the family seeking support.

#### **F405 Decreasing the Time to Treatment for Black & African American Families Through Family Peer Navigation** 1.5 CE clock hours)

*Bryony Stokes, MS, Washington State University; Jemella Kennebrew, Washington State University; Oladunni Oluwoye, PhD, Washington State University*

Family members are key facilitators to accessing care and sustained service engagement for youth and young adults who are experiencing mental health concerns. The absence of family in the treatment process is linked to longer durations of untreated psychosis and worse clinical outcomes for the person in need of services. Black/African American individuals have a higher incidence of first episode psychosis (FEP) and less family involvement in care than non-Hispanic White and Hispanic individuals in Washington, and tend to seek help from informal support systems such as schools or religious leaders rather than mental health practitioners which often delays the care needed for the individual. This presentation will discuss the Family Peer Navigator grant, funded by the National Institute of Mental Health and working in step with Coordinated Specialty Care programs. The family peer navigators are integrated within the community to increase health equity and decrease time to treatment, and work with Black/African American families to increase knowledge of mental health, identify treatment barriers, and coordinate with mental health services accessible within the family's community to better meet treatment needs.

#### **F406 Applying Augmented Intelligence to Workforce Challenges & Care Delivery** (1.5 CE clock hours)

*Dennis Morrison, PhD, Morrison Consulting; David Dropkin, MA, Columbia Wellness; Lisa Kreis, MA, Northeast Washington Alliance Counseling Services*

One of the most significant issues fueling workforce challenges in mental health care is the administrative burden. Exacerbating this burden are growing state and federal requirements for documentation and data, including requirements from insurance companies and sources of grant funding, with increased pressure to demonstrate the consistent use of evidence-based care techniques. These burdens erode clinician well-being, with compassion fatigue also putting patient well-being at risk. How can organizations alleviate the administrative burden on clinicians while expanding patient access and improving the quality of care provided, and meet increasing requirements for documentation and data? Leading organizations are turning to augmented intelligence, defined by the American Medical Association (AMA) as technology that enhances human intelligence rather than replacing it. In this session, we give an overview of the types of augmented intelligence technologies available to clinicians in behavioral health and how organizations like Columbia Wellness and Northeast Washington Alliance Counseling Services (NEWACS) are using them to address workforce challenges while improving care delivery.

#### **F407 Accountability, Empathy, & Empowerment: A Trauma-Informed Re-entry Program Review** (1.5 CE clock hours)

*Phylisha Lewis, MSW, LICSW, WA Department of Corrections; Jason Miller, BA, WA Department of Corrections*

Crossroads is a mental health therapeutic community for incarcerated men who are ready to end the cycle of incarceration by addressing self-destructive behaviors. Blending accountability and support, this innovative mental health program provides trauma-informed care and targeted skill development. Join us for this interactive workshop to learn about Crossroads and how the program has grown over the past year. You'll leave with an increased awareness of trauma-informed care for incarcerated men as it relates to re-entry, and an increased understanding of re-entry programming available for incarcerated men within Washington. We'll also discuss the role that trauma and shame play in recidivism.

### **11:45 – 12:45 pm • Lunch**

(CE clock hours not available)

### **1:00 pm – 2:30pm • Workshops**

#### **F501 A Multidisciplinary Approach to Mental Health Transition Planning** (1.5 CE clock hours)

*Ymanni Taylor, MSW, MHP, WA Department of Corrections; Brooke Amyx, MSW, LICSW, SUDP, Department of Corrections*

Re-entry Community Services program (RCSP) is a partnership between the Department of Corrections (DOC) and the Health Care Authority and includes collaboration from community providers statewide. RCSP is a voluntary program that was created in 2000 to promote public safety by providing transition planning, mental health treatment, and community support for incarcerated individuals. The program provides intensive support both prior to and post release from a Washington DOC facility. Individuals with mental health needs who are released from

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prison require hands-on linkage and integrated support for their wellness and success. This presentation will review the DOC's RCS program as a model for discussion about what's working to reduce recidivism and improve lives.

**F502 A Personal Journey with Adverse Childhood Experiences (ACEs)** (1.5 CE clock hours)

*Wil DeRouen Jr., Dads MOVE*

What does "Adverse Childhood Experiences" mean? Where do ACEs come from? How do ACEs affect us as parents? Hear from a father who has investigated this in depth, as he realized that his childhood affected him and his parenting. Studies show that 61% of adults have at least one ACE and 16% have 4 or more types of ACE. That's 1 out of every 6 adults. The presenter will share his journey showing that you can deal with your own ACEs and that it's worth it! As a single father with 5 sons who was incarcerated and served his time, he had to learn how to re-establish a relationship with his children. He not only did that, but paid off all his fines, received his voting rights back, and more! Learn more about a life that is a forward progress story of someone who has dealt with their ACEs and is making it as a single father.

**F503 Neuroscience of Play: Utilization of Video Game Assisted Treatment** (1.5 CE clock hours)

*Kevin Riffel, MA, Excelsior Wellness Center*

Success in therapy often relies heavily on a client's readiness to change and their ability to talk about their needs. Providers often experience challenges in meeting productivity expectations, client engagement, and treatment progress if a client is not able to actively engage in talk therapy. This leads to client dropout, providers feeling ineffective, and client discharge due to lack of engagement. This presentation will discuss how to adapt evidence-based practices using play therapy techniques to provide care for clients without the need to "talk." Play therapy and use of video game assisted treatment allows for clients to connect and engage while using client history, neuroscience, and reflection to create meaningful interventions. The presenter will also cover billing strategies for Medicaid enrolled clients, explore providers' use of metaphor and symbolism in referencing pop culture and video games, discuss how to select the appropriate video games to meet treatment needs and how to determine whether a provider will play with a client or observe the client's play, and more!

**F504 Understanding Dementia Related Behavior & Updates from the Latest Research** (1.5 CE clock hours)

*Alexis Bonoff, Alzheimer's Association*

Behavior is a powerful form of communication and is one of the primary ways for people with dementia to communicate their needs and feelings as they lose their ability to use language. However, some behaviors can present real challenges for caregivers to manage. Learn to decode behavioral messages, identify common behavior triggers, and learn strategies to help intervene with some of the most common behavioral challenges of Alzheimer's disease. Then we will look into the tremendous gains that have been made in the understanding of the science and basic biology underlying Alzheimer's and other dementias. These advances are leading to great strides in strategies for prevention, detection, diagnostics, and therapeutic interventions.

**F505 Bridging the Cultural Gap** (1.5 CE clock hours)

*Bianca Andrews, BA, Catholic Community Services Western WA*

The last several years have seen an uptick of agencies and organizations aiming to claim the status of diverse, inclusive, culturally competent and anti-racist. While the words are gaining lots of attention, the actual work it takes to embody these ideas has not picked up as much momentum. It's time consuming, scary and uncomfortable work and not all agencies or family run organizations have the funding needed to accomplish this work, resulting in increased focus on diversity in the applicant and employee pool without the internal structure and culture shifting. We need to better understand diversity in practice and in community supports so we can ensure that folks in need of clinical and peer support are understood culturally and can be connected to the culturally relevant support that meets their need and speaks to their beliefs, especially around wellness and healing. Join us to increase your awareness of gaps that exist with current Western practices and communities with different cultural lens surrounding behavioral health, recognize when you may not be the best option, build connections with other cultural community-based connectors, and build the capacity to support a diverse workforce.

**F506 Power of Peers: What Works to Promote Meaningful Integration into a Traditionally Clinical Approach** (1.5 CE clock hours)

*Jessica Shook, MS, Olympic Health & Recovery Services; Daniel Lister, BA, CPC, SUDPT, Olympic Health & Recovery Services; ReDonda Gibbons, Certified Peer Counselor, Olympic Health & Recovery Services*

Emerging research has shown the benefits of peer support services in the behavioral health field. They play a unique and crucial role in promoting wellness and recovery across the care continuum, and are being requested in many venues. How do agencies recruit and retain peer support staff? How are peer workers integrated into a clinical culture while still preserving the peer model? How do you create a culture that enhances the peer profession? Peer support requires helping individuals regardless of where they are in their recovery. How can agencies support peer counselors through that same lens? In this workshop, we will discuss how Olympic Health & Recovery Services has paired specialty services to those providing outreach in crisis, encampments, jails, and treatment facilities, by bridging clinical theory and peer support services into practice. We will discuss ways to support peer staff integration into clinical culture and techniques to reduce the effects of secondary trauma.

**F507 BAS/Behavioral Health Programs in Washington State** (1.5 CE clock hours)

*Dan Ferguson, MS, WA State Allied Health Center of Excellence; Tim Malroy, PhD, MS, Centralia College; Tanya Knight, PhD, Peninsula College*

Come learn about the applied baccalaureate in Behavioral Healthcare programs that community college leaders from across Washington have initiated to meet community workforce needs and assist students toward professional careers. The presenters will share data from the State's Behavioral Health Workforce Assessment and current health workforce data, discuss the range of degrees, competency-driven curriculum, cross-system collaboration, state credentials, enrollment trends, student outcomes, and graduate schools' responses. This is also an opportunity to provide feedback on the degree and the preparation that students are receiving in preparation for employment in community behavioral health and community



# 2024 ACTIVITIES AT A GLANCE

## WEDNESDAY, June 12 • PRE-CONFERENCE PROGRAMS

Noon – 6:30 pm Conference Registration  
1:00 pm – 5:00 pm Vendor Set Up  
4:30 pm – 6:30pm Welcome Reception

## THURSDAY, June 13 • CONFERENCE PROGRAMS

7:30 am – 5:00 pm Conference Registration  
7:30 am – 8:30 am Breakfast

TRACKS	CORRECTIONS & MENTAL HEALTH	RECOVERY & RESILIENCY	INNOVATIVE CARE PRACTICES	SERVICES ACROSS THE LIFESPAN	RACE & EQUITY IN MENTAL HEALTH	GENERAL SERVICES & PARTNERSHIPS	GENERAL SERVICES & PARTNERSHIPS
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### THURSDAY, June 13

#### CONFERENCE PROGRAMS

8:30 am-9:00 am	<b>CONFERENCE WELCOME, Kim Zacher</b> , Chair, Washington Council for Behavioral Health and CEO, Comprehensive Life Resources and <b>Michael Langer</b> , Interim Director, Division of Behavioral Health & Recovery, Health Care Authority						
9:00 am – 10:00 am	<b>KEYNOTE ADDRESS</b> by <b>Jeanann Verlee</b> , <i>Speaking the Unspeakable: Defying Stigma through Poetry &amp; Storytelling</i>						
10:15 am – 11:45 am	<b>T101</b> When Time-Outs Don't Work: Creating a Culture of Accountability During Incarceration	<b>T102</b> Peer Support in Washington - Creating the Profession of Certified Peer Specialist	<b>T103</b> Promising Outcomes for Certified Community Behavioral Health Clinics (CCBHCs)	<b>T104</b> Over the Rainbow: Best Practices/Working with Sexual & Gender Diverse Midlife & Older Adults	<b>T105</b> The Re-Indigenization of Motivational Interviewing: Finding the Roots of Integrity	<b>T106</b> Meeting Our Clients Where They Are	<b>T107</b> Lend Me Your Ear! How to Communicate with Your Local & State Legislators
11:45 am – 12:30 pm	<b>LUNCH</b>						
12:30 pm -1:30 pm	<b>KEYNOTE ADDRESS</b> by <b>Daniel E. Dawes, JD</b> , <i>Leveraging the New Determinants of Health to Improve Patient Outcomes</i>						
1:45 pm – 3:15 pm	<b>T201</b> Gender Affirming Care for Transgender & Intersex Individuals in a Corrections Setting	<b>T202</b> Operationalizing Peer Support	<b>T203</b> WA's Coordinated Specialty Care for Early Psychosis: Exploration & Expansion/New Journeys	<b>T204</b> Integrating Mental Health & SUD Treatment into School-Based Systems	<b>T205</b> Hidden Cry for Help: Addressing Suicide Ideation & Completion among Latinx Adolescents in WA	<b>T206</b> Healthy Boundaries – The Path to Supporting a Successful Peer Workforce	<b>T207</b> WA Health Corps Loan Repayment Program
3:30 pm – 5:00 pm	<b>T301</b> EMDR in Corrections: Healing Cultural and Identity Trauma	<b>T302</b> A Mom & Her Daughter's Journey of Loss, Trauma, Mental Health, Addiction, & Recovery	<b>T303</b> Harm Reduction Peer Support Group at Harborview Medical Center	<b>T304</b> Virtual Intensive Engagement Wraparound (VIEW)	<b>T305</b> Do You See Me? Moving from Tolerance to Acceptance	<b>T306</b> Improving Population Health Using Emergency Department & Inpatient Data	<b>T307</b> <i>TED-Style Talks:</i> (A) Effective Storytelling as a Peer Support Counselor (B) WA Support After Suicide Program (C) Where there is hope... (D) What Each Person Can Do to Address the Addiction Epidemic
5:00 pm – 5:30 pm	<b>QUICK TAKE SESSION(S) (ANNOUNCED ON SITE)</b>						
5:30 pm – 7:00 pm	<b>PEER SUPPORT RECEPTION</b>						

### FRIDAY, June 14

#### CONFERENCE PROGRAMS

7:30 am – 9:00 am	<b>BREAKFAST, VENDOR TABLES OPEN</b>						
9:00 am – 10:00 am	<b>KEYNOTE ADDRESS</b> by <b>Ricky Kidd</b> , <i>Resilience Ready</i>						
10:15 am – 11:45 am	<b>F401</b> Transgender Incarcerated Individuals: Their Experience, What is Being Done to Help, & What Can Still be Done	<b>F402</b> Peer Support & Mindfulness at Harborview Medical Center	<b>F403</b> A Client-Centered Approach to Engagement & Recovery through E-IMR	<b>F404</b> Linking Arms Across Systems to Support the Mental Health of Washington Kids & Families	<b>F405</b> Decreasing the Time to Treatment for Black & African American Families Through Family Peer Navigation	<b>F406</b> Applying Augmented Intelligence to Workforce Challenges & Care Delivery	<b>F407</b> Accountability, Empathy, & Empowerment: A Trauma-Informed Reentry Program Review
11:45 am -12:45 pm	<b>LUNCH</b>						
1:00 pm -2:30 pm	<b>F501</b> A Multidisciplinary Approach to Mental Health Transition Planning	<b>F502</b> A Personal Journey with Adverse Childhood Experiences	<b>F503</b> Neuroscience of Play: Utilization of Video Game Assisted Treatment	<b>F504</b> Understanding Dementia Related Behavior & Updates from the Latest Research	<b>F505</b> Bridging the Cultural Gap	<b>F506</b> Power of Peers: What Works to Promote Meaningful Integration into a Traditionally Clinical Approach	<b>F507</b> BAS/Behavioral Health Programs in Washington State

# INFORMATION

## Registration Fees (register online at [www.wbhc.org](http://www.wbhc.org)):

Law & Ethics (see page 3 for more info): \$190 (includes both sessions)

Conference: \$375 per person before May 15, 2024; \$350 per person for groups of 3 or more registering at the same time before May 15, 2024; \$400 per person after May 15, 2024

## Continuing Education (CE)

Up to 10.0 clock hours of Continuing Education (for Licensed Social Workers, Licensed Mental Health Counselors and Licensed Marriage & Family Therapists) are available to participants attending the entire conference. Certificates will be issued to participants based on the number of hours they have attended at the conference. Additional hours are also available through the Law & Ethics course (separate registration fee required).

The Washington Council for Behavioral Health 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.

## Consumer, Advocate & Peer Scholarships

Registration scholarships for consumers, advocates, and peers may be available from DBHR at the Health Care Authority. Please visit the registration website at [www.wbhc.org](http://www.wbhc.org) and click on the Scholarships tab for information on how to apply. **Please note that scholarships cover only the conference registration fee, and do not cover travel or hotel, or the extra fee for Law & Ethics.**

## ACKNOWLEDGEMENTS

The Washington Council for Behavioral Health is the sponsor of the 2024 Washington Behavioral Healthcare Conference. Our system partners are the Health Care Authority and the Department of Corrections. **We are grateful for conference funding support from the Health Care Authority and from the Department of Corrections.** The Council also thanks the Behavioral Health Advisory Committee for its support of the conference.

The Washington Council for Behavioral Health would like to acknowledge and thank the 2023-2024 Education Committee, who played an invaluable role in the conference planning and decision-making. The Committee Members are:

**Darcell Slovek-Walker**, Chair, Transitional Resources

**Stacey Devenney**, Harborview Medical Center

**Jim Novelli**, Discovery Behavioral Health

**Wendy Sisk**, Peninsula Behavioral Health

**Richard Stride**, Cascade Community Healthcare

**Rose Hillock**, HCA, Division of Behavioral Health & Recovery

**Karie Rainer**, Department of Corrections

**READY TO REGISTER?**

**On-line at [www.wbhc.org](http://www.wbhc.org)**