

Embracing The Spectrum

THE AGES AND STAGES OF EARLY PSYCHOSIS

A Statewide Early Psychosis Virtual Conference

SEPTEMBER 1-2, 2021 • DAY 1 | 8:00 AM – 12:30 PM (CENTRAL) • DAY 2 | 10:30 AM – 3:00 PM (CENTRAL)



The Tennessee Department of Mental Health and Substance Abuse Services (TDMHSAS), in partnership with the Tennessee Association of Mental Health Organizations (TAMHO), is eager to announce Tennessee's fourth Early Psychosis Conference. Just like last year, this year's conference will be virtual and will include sessions on both first episodes of psychosis and clinical high risk for psychosis.

This year's conference theme, *"Embracing the Spectrum: The Ages and Stages of Early Psychosis."* Such a theme is echoed as it is our life's experiences that reflect the light within us. In turn, as mental health professionals and supporters, we shine our light upon those most in need in order to reveal the beautiful hues within each individual. As with a prism, light helps to illuminate the beautiful colors of nature. Mental health helps to illuminate the vastly-colorful experiences across the spectrum of our lives.

The Tennessee Department of Mental Health and Substance Abuse Services invites behavioral health providers, administrators, families, youth, young adults, and other community members to attend this virtual event in order to increase their knowledge and implementation of best practices in early psychosis care, to hear stories of recovery and hope from peers, and to network with others who share a passion for this work.

We hope you enjoy this exciting event!

Conference Planning Committee Members

Jessica Mullins, LMSW, Tennessee
Department of Mental Health and
Substance Abuse Services (TDMHSAS)

Jules Wilson, Tennessee Department of
Mental Health and Substance Abuse
Services (TDMHSAS)

Morgan Morris, Tennessee Department of
Mental Health and Substance Abuse
Services (TDMHSAS)

Krystal Fortney, MA, LPC-MHSP, NCC,
Tennessee Department of Mental Health
and Substance Abuse Services
(TDMHSAS)

Tariq Pettis-Smith, MACCP, CMI
Healthcare Services

Kaelin Large, MSW, Alliance Healthcare
Services

Hailey Terry, Carey Counseling Center

Jackson Westbrook, McNabb Center

Jennifer Price, McNabb Center

Travina Wynn, MSW, Mental Health
Cooperative

AGENDA AT A GLANCE

DAY ONE – September 1 st 8:30am-12:30pm (Central) / 9:30am-1:30pm (Eastern)	DAY TWO – September 2 nd 10:30am-3:00pm (Central) / 11:30am-4:00pm (Eastern)
8:00am – 8:30am ----- Sign-In and Navigation Time	10:30am – 11:00am ----- Sign-In and Navigation Time
8:30am – 10:00am ----- OPENING GENERAL SESSION Students With Psychosis	11:00am – 12:00pm ----- Breakout 3A –Addressing Social Difficulties Among Young Adults with Psychosis: Innovations and Opportunities
10:00am – 10:15am----- Break, Platform Navigation, Expo Hall	Breakout 3B – The Intersection Between Autism and Clinical High Risk for Psychosis
10:15am – 11:15am----- Breakout 1A – Rethinking Delusions: Beliefs on a Spectrum, How to Relate, and How to Feel Better Breakout 1B – Community Programs for Outreach and Intervention with Youth and Young Adults at Clinical High Risk for Psychosis Grant Program	12:00pm – 12:15pm----- Break, Platform Navigation, Expo Hall
11:15am – 11:30am----- Break, Platform Navigation, Expo Hall	12:15pm – 1:15pm ----- Breakout 4A – A Georgia CSC Team’s Secret Sauce for Success – Family Engagement Breakout 4B – Moving On: Transitions Following Coordinated Specialty Care
11:30am – 12:30pm----- Breakout 2A – How Should We Discuss Psychosis Risk with Patients and Families? Providing Psychoeducation That Meets Consumer’s Needs Breakout 2B – Narrative and Indigenous Approaches to Psychotic Experiences	1:15pm – 1:30pm ----- Break, Platform Navigation, Expo Hall
12:30pm ----- Adjourn for Day 1	1:30pm – 3:00pm ----- CLOSING GENERAL SESSION Collaboration and Partnership Between Early Psychosis Programs
	3:00pm ----- Adjourn for Day 2

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A Statewide Early Psychosis Virtual Conference

SEPTEMBER 1-2, 2021

DAY 1 | 8:00 AM – 12:30 PM (CENTRAL) • DAY 2 | 10:30 AM – 3:00 PM (CENTRAL)

DETAILED CONFERENCE AGENDA

DAY ONE – September 1st

8:30am-12:30pm (Central) / 9:30am-1:30pm (Eastern)

8:00am – 8:30am -----

Sign-In and Navigation Time

8:30am – 10:00am -----

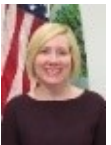
OPENING GENERAL SESSION

Students With Psychosis

OPENING REMARKS



Marie Williams, LCSW, Commissioner, Tennessee Department of Mental Health and Substance Abuse Services (TDMHSAS), Nashville, Tennessee



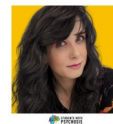
Melinda Baldwin, PhD, LCSW, Chief, Child, Adolescent, and Family Branch, Center for Mental Health Services, Substance Abuse and Mental Health Services Administration (SAMHSAS), Rockville, Maryland

SPEAKER INTRODUCTIONS & CLOSING REMARKS



Jessica Mullins, LMSW, Director, Youth & Young Adult Initiatives, Office of Children, Young Adults, and Families, Tennessee Department of Mental Health and Substance Abuse Services (TDMHSAS), Nashville, Tennessee

KEYNOTE SPEAKERS



Cecilia McGough, Founder & Executive Director, Students With Psychosis, USA

Shira Agam, President, Executive Committee (Executive Board), Students With Psychosis, Canada



Emeka Chima, Secretary (Executive Board), Students With Psychosis, Maryland

Baileigh Renfrow, Executive Board, Students With Psychosis, USA



SESSION DESCRIPTION:

Students With Psychosis puts our students at the decision-making table; 100% of our executive board members are current student leaders or recently graduated alumni from our student leader

Sponsored by



Department of
**Mental Health &
Substance Abuse Services**

In Partnership with



tamho
tennessee association of
mental health organizations

program. The unconventional approach to our executive board structure helps us reflect the community's needs better and gives a voice and decision-making power to the marginalized and underrepresented community we serve. Students With Psychosis is what the students decide the nonprofit to be and tackles issues they find the most prevalent. Students With Psychosis is a space where students can be students, meet fellow peers, and not be confined or prefaced by their diagnosis.

LEARNING OBJECTIVES:

Students With Psychosis empowers student leaders globally through community building and collaboration. At the conclusion of this session, participants will have:

1. Gained knowledge for valuing the lived experience global perspective of psychosis;
2. Identified how to create psychosis inclusive workplaces and classrooms; and,
3. Identified how to get more involved with Students With Psychosis.

BIOGRAPHIC SKETCHES:

Cecilia McGough | Cecilia McGough is a New York City-based mental health activist, nonprofit executive director, media consultant, and radio astronomer. Cecilia also happens to have schizophrenia but does not let her diagnosis define her. Cecilia is the founder and executive director of the global nonprofit Students With Psychosis. As a TEDx speaker, Special Books By Special Kids interviewee, and Anthony Padilla interviewee, Cecilia's story have been viewed over 25 million times over multiple platforms across the globe and featured in Forbes, Glamour UK, Women's Health Magazine, Barcroft TV, and CBS This Morning national news. Cecilia is an UNLEASH talent who traveled to Denmark in August of 2017 to be an active voice towards attaining the United Nations Sustainable Development Goals (SDGs) and to make sure people with psychosis are represented. Also, Cecilia has been selected as the keynote speaker for the Schizophrenia International Research Society 2022 Congress. At the age of 17, Cecilia co-discovered PSR J1930-1852 leading to opportunities such as helping represent the United States in the International Space Olympics in Russia and also being a Virginia Aerospace Science And Technology Scholar through the NASA Langley Research Center. Cecilia's story as a radio astronomer through the Pulsar Search Collaboratory can be seen in the documentary Little Green Men. Together, we can change the face of schizophrenia.

Baileigh Renfrow | Freethinker, writing enthusiast, certified storm spotter, and self-proclaimed fitness junkie, Baileigh Renfrow is also a dedicated mental health advocate. Her passion for raising awareness and educating her community stems from a lifelong battle with depression and her more recent diagnosis of schizoaffective disorder. She believes that the simple act of using her voice can help overcome the gross misrepresentations and stigmatization that come with the diagnosis of a psychotic disorder. Baileigh graduated from the University of Memphis magna cum laude with a degree in Earth Sciences and enjoyed all things outdoors. She is honored to be a member of the Students With Psychosis Executive Board and achieve side-by-side with her peers by developing ideas through creative thinking.

Shira Agam | Shira Agam is a mental health advocate, student, teacher, trumpeter, and scientist. She is the President of the Executive Board of Students With Psychosis. Shira has lived with severe mental illness her entire life, with diagnoses of schizoaffective disorder, borderline personality disorder, anorexia, PTSD, anxiety disorders, and a learning difference. This may seem like a lot, but it does not stop her from

dreaming big and doing what she loves. Shira teaches grades 1 to university, performs trumpet around the globe, works in research labs, and has recently started to advocate over Instagram (@psychosis_diarie) and YouTube (@Students With Psychosis). She believes that mental health education is a way to break down stigma and help people take better care of their minds.

Emeka Chima | Emeka Chima is 22 years old and from the state of Maryland. He is an Undergrad studying for his Bachelor's degree in Information Systems Management at the University of Maryland Global Campus. He is a two-time recipient for being recognized on the Dean's List. In 2014, during his Junior year of High School, Emeka was diagnosed with mild schizophrenia. Years later, during his mental health journey, he joined Students With Psychosis in April 2020, and later became inducted into the 2020-2021 SWP Executive Board as Secretary. Through Students With Psychosis, he has become a mental health advocate and continues to divulge his story and lived experience with his condition. In his spare time, Emeka immerses himself in free-writing and enjoys playing the piano and cello.

10:00am – 10:15am -----

Break, Platform Navigation, Expo Hall

10:15am – 11:15am BREAKOUT 1A & 1B -----

Breakout 1A – Rethinking Delusions: Beliefs on a Spectrum, How to Relate, and How to Feel Better

SESSION AND SPEAKER INTRODUCTIONS



Jessica Mullins, LMSW, Director, Youth & Young Adult Initiatives, Office of Children, Young Adults, and Families, Tennessee Department of Mental Health and Substance Abuse Services (TDMHSAS), Nashville, Tennessee

PANEL MEMBERS



Julia Sheffield, PhD, Assistant Professor of Psychiatry & Behavioral Sciences, Jack Martin MD Research Professor in Psychopharmacology, Nashville, Tennessee

Emily Byers, CPRS, Recovery Coach, Department of Psychiatry & Behavioral Sciences, Psychosis and Addictions Programs, Nashville, Tennessee



Aaron P. Brinen, PsyD, Assistant Professor of Clinical Psychiatry & Behavioral Sciences, Director of Residency Training in Psychotherapy, Nashville, Tennessee



SESSION DESCRIPTION:

PRESENTED BY THE VANDERBILT FIRST EPISODE PSYCHOSIS TEAM

Delusions are strongly held beliefs that are not commonly shared by others, but that resonate with the individual experiencing them. Labels of delusions are often thrown around in stigmatizing ways ("you're being delusional", "you're just paranoid", "that's a crazy idea"), increasing distress and feelings of isolation. In this session,

we will work to reframe delusions as existing on a spectrum of beliefs that many others experience. We will begin by defining delusions and the dimensions of conviction, distress, and preoccupation. Then, we will provide a personal experience of delusions and discussion of the helpful and unhelpful ways that others related to it. Finally, psychotherapy for delusions will be discussed, highlighting efficacious treatments and ongoing research.

LEARNING OBJECTIVES:

At the conclusion of this session, participants will have:

1. Learned the definition of a delusion and the dimensions of delusional beliefs;
2. Considered whether it is truly so easy to define a belief as a delusion;
3. Gained awareness of the experience of having a delusion, including both helpful and unhelpful ways to relate; and,
4. Gained an appreciation of the different psychotherapeutic treatment options for delusion.

BIOGRAPHIC SKETCHES:

Julia Sheffield, PhD | Dr. Sheffield runs a research lab that investigates cognitive mechanisms of psychotic experiences. Dr. Sheffield is currently running the Worry Intervention Study Evaluating the Updating of Persecutory Beliefs (WISEUP), a randomized clinical trial of CBTp-based psychotherapy for persecutory delusions. Dr. Sheffield is a licensed clinical psychologist specializing in psychotherapy for individuals with psychosis, using a cognitive-behavioral therapy (CBTp) approach and is a clinician on Vanderbilt's early psychosis team.

Emily Byers, CPRS | Emily Byers joined Vanderbilt in 2019 as a Recovery Coach. As a person in recovery from substance use disorder and living with a mental health diagnosis, Emily enjoys working as a peer and using her experience in hopes of helping others. Emily facilitates recovery focused groups at Vanderbilt's Intensive Outpatient Program (IOP) and serves as a peer specialist for the Navigate Team; specialized in helping those experiencing psychosis. Emily believes in the power of recovery and transformation, inviting all patients to embrace the process of healing.

Aaron P. Brinen, PsyD | Aaron P. Brinen, PsyD, is a primary developer of recovery-oriented cognitive therapy (CT-R) along with Aaron T. Beck, MD. Under the guidance of Dr. Beck, Dr. Brinen has worked to formalize and standardize the CT-R protocol for individual and group therapy settings, as well as for use in team-based psychiatric care and during inpatient treatment. He is a co-author of the manual of CT-R for serious mental health conditions, and has been active in the training of community therapists from around the world. Dr. Brinen is interested in researching the impact of recovery-oriented cognitive therapy on inpatient and outpatient individuals. Additionally, he is interested in the crossover of different evidence-based treatments, particularly prolonged exposure for PTSD applied to individuals with both PTSD and schizophrenia. He is also the supervisor for the WISEUP clinical trial, studying treatment for persecutory delusions.

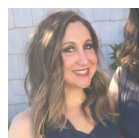
Breakout 1B – Community Programs for Outreach and Intervention with Youth and Young Adults at Clinical High Risk for Psychosis Grant Program

SESSION AND SPEAKER INTRODUCTION



Morgan Morris, Youth & Young Adult Coordinator, Office of Children, Young Adults, and Families, Tennessee Department of Mental Health and Substance Abuse Services (TDMHSAS), Nashville, Tennessee

SPEAKER



Emily Lichvar, PhD, Public Health Advisor, Child, Adolescent, and Family Branch, Center for Mental Health Services, Substance Abuse and Mental Health Services Administration (SAMHSA), Rockville, Maryland

SESSION DESCRIPTION:

This presentation will feature the grant program entitled “Community Programs for Outreach and Intervention with Youth and Young Adults at Clinical High Risk for Psychosis” from the Substance Abuse and Mental Health Services Administration (SAMHSA). The purpose, program requirements, including a stepped care approach for intervention, and key data points will be explored. Key data points include outreach, screening, enrollment, demographics, psychosis conversion, and outcomes aggregated across 21 grants.

LEARNING OBJECTIVES:

At the conclusion of this session, participants will have:

1. An understanding of the program's purpose and requirements;
2. An understanding of a stepped care approach for intervention; and,
3. An overview of key data points, including outreach, screening, enrollment, demographics, psychosis conversion, and outcomes.

BIOGRAPHIC SKETCH:

Emily Lichvar, PhD | Emily K. Lichvar, Ph.D. is an Applied Developmental Psychologist and is currently a Public Health Advisor in the Child, Adolescent and Family Branch of the Center for Mental Health Services at the Substance Abuse and Mental Health Services Administration (SAMHSA). In this role she provides program oversight, guidance, and leadership to grants, contracts and cooperative agreements who utilize a system of care approach to better serve children and adolescents nationwide. She also serves as adjunct faculty at Montgomery College, University of Maryland Baltimore, and Pace University. Dr. Lichvar received her B.A. in psychology from University of Delaware, M.A. in clinical psychology from Teachers College, Columbia University, and Ph.D. in applied developmental psychology from Fordham University. She lives in Montgomery County, Maryland with her daughter.

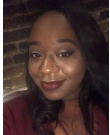
11:15am – 11:30am-----

Break, Platform Navigation, Expo Hall

11:30am – 12:30pm **BREAKOUT 2A & 2B** -----

Breakout 2A – How Should We Discuss Psychosis Risk with Patients and Families? Providing Psychoeducation That Meets Consumer’s Needs

SESSION AND SPEAKER INTRODUCTION



Travina Wynn, MSW, Supported Employment & Education Specialist, Mental Health Cooperative, Nashville, Tennessee

SPEAKER



Shaynna Herrera, PhD, Instructor of Psychiatry, Icahn School of Medicine / Project Director, Psychosis Risk Program, The Mount Sinai Hospital, New York, New York

SESSION DESCRIPTION:

Young people at risk for psychosis (PR) are increasingly being identified in specialized and community programs in an effort to promote early intervention and improve recovery outcomes. Empathic communication about PR through psychoeducation has the potential to enhance treatment engagement and meet the needs of these consumers. At our specialized PR program, we developed a PR psychoeducation intervention called Brief Educational Guide for Individuals in Need (BEGIN). BEGIN is grounded in theory and consumer feedback, utilizes a structured therapeutic design, integrates technology and visual material, and is amendable to telehealth delivery. This talk will first review the potential concerns and benefits of disclosing PR status with patients and family members. Then, we will outline the steps we used to develop BEGIN, and describe its content, format, and method of delivery. We will report qualitative data from PR individuals and parents of PR individuals who were involved in BEGIN’s development, as well as data demonstrating the feasibility of BEGIN, including feasibility of telehealth delivery.

Overall, we found that PR individuals and parents had unmet needs for condition-specific and general mental health education. They had a positive impression of BEGIN and reported that BEGIN appears to promote agency and elucidate options for getting better. They also reported that the step-by-step structure and visual presentation facilitates telehealth delivery. Lastly, we will discuss next steps for BEGIN, including the pilot trial that is underway and evaluating BEGIN as a standardized method for clinicians to communicate PR psychoeducation.

LEARNING OBJECTIVES:

At the conclusion of this session, participants will have:

1. Gained an understanding of the potential benefits and limitations of identifying and labeling individuals as being at risk for psychosis;
2. Learned about the fundamentals of providing psychoeducation about a psychosis risk (PR) syndrome, and about a structured psychoeducation intervention for PR developed by stakeholders called BEGIN: Brief Educational Guide for Individuals in Need; and,
3. Identified consumers’ desires for PR psychoeducation and the potential impact of effective PR psychoeducation on future outcomes.

BIOGRAPHIC SKETCH:

Shaynna N. Herrera, PhD | Dr. Shaynna N. Herrera is a licensed clinical psychologist and Instructor of Psychiatry at Icahn School of Medicine at Mount Sinai. She serves as the Project Director of the Psychosis-Risk Program at Mount Sinai, which is a clinical and research program dedicated to serving adolescents and young adults who are at risk of developing psychosis. Dr. Herrera received her Bachelor’s degree in psychology from Boston University and her PhD in Clinical Psychology from Ferkauf Graduate School of Psychology at Yeshiva University. She completed her predoctoral psychology internship at the UCLA Semel Institute and completed her postdoctoral fellowship at James J. Peters VA Medical Center and Icahn School of Medicine at Mount Sinai, where she received specialized training in psychosis risk syndromes. She currently provides assessment and therapy to patients with psychosis spectrum symptoms, conducts research on psychoeducation and stigma in psychosis -risk populations, and provides training and education on the identification and treatment of psychosis risk symptoms.

Breakout 2B – Narrative and Indigenous Approaches to Psychotic Experiences

SESSION AND SPEAKER INTRODUCTION



Kaelin Large, MSW, Team Lead, Alliance Healthcare Services, Memphis, Tennessee

SPEAKER



Lewis Mehl-Madrona, MD, Medical Director, Wabanaki Public Health, Maine

SESSION DESCRIPTION:

Approaches exist to what are called psychotic phenomena that lie outside the world of conventional psychiatry and are worthy of consideration. A worldwide hearing voices movement has arisen from one psychiatrist’s experience in taking voices seriously in Maastricht, in The Netherlands. Online hearing voices groups have flourished during the Covid-19 pandemic. Similarly, in Northern

Finland, an indigenous inspired approach to psychosis has emerged called Open Dialogue, in which a community forms around the distressed person and all members of that community contribute to reducing that distress. In addition, the world's indigenous cultures have experience managing altered states of consciousness, sometimes produced intentionally through ceremony (with or without substances) and sometimes occurring without volitional seeking. Narrative and indigenous cultures acknowledge that psychotic states can occur from trauma (as in the power-threat-meaning framework in which people are unable to escape from chronic), from unsupervised spiritual voyaging, from the breaking of taboos, from the ingestion of substances, or from learned stories about the world that are relatively untenable and therefore dysfunctional. These cultures have practical methods for approaching psychosis which grant full ontological status to the experience including beings encountered while in the psychotic state and use dialogical methods to reduce the distress related to these beings. Common to all these approaches is the acceptance of the experience and a relational approach to making meaning together about what has happened. The task is to bring the person back to the ordinary world with their visions and potential teachings intact. The person experiencing psychosis is honored as having made a difficult journey potentially on behalf of others. The variety of ways of working with the experience include placating or appeasing ancestors, making amends for entering taboo areas, communicating and confronting distressing voices and figures, being aided to separate from the beings encountered, and finding protection through a loving, compassionate intact community while undergoing distressing experiences. This approach is highly compatible with the dialogical self-theory and therapy of Hermans and Hermans-Knopka and the Open Dialogue approach of the Finnish Psychosis Group. Examples will be given of how one interacts with a client from this framework, including dialogue with a voice, using imagery to put form to the source of the voice, the use of community and techniques from psychodrama (or North American sacred dramatic ritual) to better manage a troubling voice or vision. We will discuss what happens in a hearing-voices group. Within a two-eyed seeing approach to experience, these methods do not contravene psychiatric medication, but do reframe its use as making unbearable affect bearable so that psychotherapeutic and community healing can occur. Recovery is individually unique but can sometimes be accomplished without ongoing medication and people can live fulfilling lives.

LEARNING OBJECTIVES:

At the conclusion of this session, participants will have:

1. Discovered the origins and core philosophy of the healing voices movement;
2. Explored three techniques that can be used in the narrative therapy of voice hearers; and,
3. Identified three ways in which indigenous people explain psychosis.

BIOGRAPHIC SKETCH:

Lewis Mehl-Madrona, MD | Dr. Mehl-Madrona graduated from Stanford University School of Medicine and trained in family medicine, psychiatry, and clinical psychology. He completed his residencies in family medicine and in psychiatry at the University of Vermont College of Medicine. He has been on the faculties of several medical schools, most recently as associate professor of family medicine at the University of New England. He continues to work with aboriginal communities to develop uniquely aboriginal styles of healing and health care for use in those communities. He is interested in the relation of healing through dialogue in community and psychosis. He is the author of *Coyote Medicine*, *Coyote Healing*, and *Coyote Wisdom*, a trilogy of books on what Native culture has to offer the modern world. He has also written *Narrative Medicine*, *Healing the Mind through the Power of Story: The Promise of Narrative Psychiatry*, and, his most recent book with Barbara Mainguy, *Remapping Your Mind: The Neuroscience of Self-Transformation through Story*. Lewis is currently the Medical Director for Wabanaki Public Health, which serves the five tribes of Maine. He serves on the Board of Directors of the Coyote Institute for Studies of Change and Transformation. Lewis has been studying traditional healing and healers since his early days and has written about their work and the process of healing. His primary focus has been upon Cherokee and Lakota traditions, though he has also explored other Plains Cultures and those of Northeastern North America. His goal is to bring the wisdom of indigenous peoples about healing back into mainstream medicine and to transform medicine and psychology through this wisdom coupled with more European derived narrative traditions. He has written scientific papers in these areas and continues to do research. His current interests center around psychosis and its treatment within community and with non-pharmacological means, narrative approaches to chronic pain and its use in primary care, and further developing healing paradigms within a narrative/indigenous framework.

12:30pm-----

Adjourn for Day 1

DAY TWO – September 2nd

10:30am-3:00pm (Central) / 11:30am-4:00pm (Eastern)

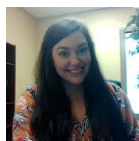
10:30am – 11:00am -----

Sign-In and Navigation Time

1:00am – 12:00pm BREAKOUT 3A & 3B -----

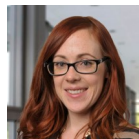
Breakout 3A – Addressing Social Difficulties Among Young Adults with Psychosis: Innovations and Opportunities

SESSION AND SPEAKER INTRODUCTION



Hailey Terry, OnTrack Recovery Coach, Carey Counseling Center, Paris, Tennessee

SPEAKER



Aubrey M. Moe, PhD, OSU Early Psychosis Intervention Center, Assistant Professor, Departments of Psychiatry and Behavioral Health and Psychology, The Ohio State University Wexner Medical Center, Columbus, Ohio

SESSION DESCRIPTION:

Psychotic disorders are serious illnesses that impact numerous individuals worldwide and can lead to notable difficulties with social and role functioning. Though early intervention for psychosis improves outcomes and clinical programs providing specialized care for recent-onset psychosis are increasingly available, clinical outcomes for young adults with psychosis remain suboptimal, in part due to aspects of illness which tend to remain impaired even when psychiatric symptoms have remitted (e.g., social functioning) as well as a lack of interventions intended specifically for young adults. Social difficulties are common among people with psychosis and hinder the ability of young adults with psychosis to access important social supports. While a robust literature supports the effectiveness of social skills training for psychotic disorders, many available treatments targeting social functioning in psychosis were not designed specifically for young adults or focus primarily on improving social cognition as opposed to development of specific behavioral skills for making and keeping friends. In this session, we will review existing social interventions and evidence supporting their use among young people with psychosis, while also discussing emerging evidence for a novel approach to addressing unmet social needs as well as future directions for continuing to support social recovery among youth and young adults living with psychosis.

LEARNING OBJECTIVES:

At the conclusion of this session, participants will have:

1. Gained an understanding of the relevance of social functioning and peer relationships for young people with psychosis;
2. Become able to identify and describe existing and novel approaches to addressing social functioning in these individuals; and,
3. Discovered additional opportunities for optimizing psychosocial treatments to facilitate social and interpersonal functioning in young people with psychosis.

BIOGRAPHIC SKETCH:

Aubrey Moe, PhD | Dr. Moe is a licensed clinical psychologist and Assistant Professor of Psychiatry and Behavioral Health and Psychology at The Ohio State University, where she is part of the Early Psychosis Intervention Center (EPICENTER). Dr. Moe has extensive experience in the provision of evidence-based clinical and assessment services to adolescents and young adults with psychosis, at clinical high risk for psychosis, and with other serious mental illnesses in a variety of settings, including community mental health clinics, academic medical centers, primary care settings, private psychiatric practices, and inpatient psychiatric facilities. She is an active clinical scientist, and her research on psychosis has been funded by the American Psychological Foundation and the National Center for Advancing Translational Science at the National Institutes of Health. Dr. Moe has published her work in a variety of highly regarded academic journals, including Schizophrenia Bulletin, Psychiatric Rehabilitation, Schizophrenia Research, Cognitive Neuropsychiatry, and Early Intervention in Psychiatry.

Breakout 3B – The Intersection Between Autism and Clinical High Risk for Psychosis

SESSION AND SPEAKER INTRODUCTION



Tariq Pettis-Smith, MACCP, Program Director for CHR-P, CMI Healthcare Services, Inc., Memphis, Tennessee

SPEAKER / PRESENTING AUTHOR



Jason Schiffman, PhD, Professor, Director of Clinical Training, and Director, YouthFIRST, Department of Psychology, University of Maryland Baltimore County (UMBC), Baltimore, Maryland

NON-PRESENTING CO-AUTHORS | **Camille Wilson, PhD**, Postdoctoral Scholar, Nationwide Children's Hospital Columbus, YouthFIRST, Department of Psychology, University of Maryland Baltimore County (UMBC), Baltimore, Maryland / **Keira O'Donovan, MA**, Doctoral Scholar, University of Maryland Baltimore County (UMBC), Baltimore, Maryland

SESSION DESCRIPTION:

Despite apparently distinct diagnostic criteria for high-functioning autism and the attenuated psychosis syndrome, there appears to be areas of overlap between the two. This talk presents different

theoretical models explaining the potential overlap, diagnostic criteria for both labels, and possible areas of convergence that create challenges for efforts to consider these syndromes as completely distinct. The presentation will also review recent literature on the commonalities between the two disorders and offer insights into best practices for assessment and treatment. We will conclude with clinical examples that illustrate challenges associated with efforts to fully separate the two diagnoses, making a case for a more inclusive and “pluripotent” approach that emphasizes understanding the whole person and their unique experiences, rather than focusing on one diagnostic label or another.

LEARNING OBJECTIVES:

At the conclusion of this talk, participants will have:

1. Received an overview of autism and the attenuated psychosis syndrome;
2. Identified areas of convergence and divergence in diagnostic categorization; and,
3. Considered tips for assessment and clinical conceptualization useful for treatment.

BIOGRAPHIC SKETCH:

Jason Schiffman, PhD | Jason Schiffman received his Ph.D. in Clinical Psychology from the University of Southern California in 2003. He is Professor of Clinical Science and the inaugural Director of Clinical Training for the University of California, Irvine’s (UCI) Clinical Psychology program. Dr. Schiffman runs the PREVENT research lab at UCI, and is founder and past Co-Director of the Maryland Early Intervention Program’s Strive for Wellness Clinic, both of which provide research, training, and services designed to improve the lives of young people with or at risk for psychosis, as well as their families. Dr. Schiffman is also the Program Coordinator for a SAMHSA funded CHRP grant he and his team authored, providing supervision, training, and services of his stepped-care model of treatment for CHR. Prior to his work in California and Maryland, Dr. Schiffman was a professor at the University of Hawaii, Department of Psychology, where he was the Director of the Child and Adolescent Thought Disorders Program. He currently trains specialty clinics across the country in his psychosocial intervention model for those at risk for psychosis, as well as in the administration of the Structured Interview for Psychosis Risk Syndromes (SIPS), the gold standard interview for detecting risk for psychosis. Dr. Schiffman is one of only three certified trainers of the SIPS in the US.

Dr. Schiffman has published over 150 scientific articles related to mental health. Procuring in excess of \$7.5m in his career, Dr. Schiffman has held grants with the National Institute of Mental Health for work on risk for psychosis and psychosis risk, the National Alliance for Research on Schizophrenia and Depression for research attempting to improve early identification methods, the Mental Health Foundation embarking on anti-stigma efforts, the State of Hawaii Departments of Education and Health for clinical services he and his team provided to youth receiving public mental health services, Maryland’s Behavioral Health Administration for assessment and intervention services for youth and young adults at risk for psychosis, and the Substance Abuse and Mental Health Services Administration for the establishment of a model community mental health specialty clinic for those at risk for psychosis.

Dr. Schiffman’s research seeks to refine the identification of young people at risk for psychotic disorders, better understand the effects of psychosocial interventions for adolescents with psychosis, and uncover

mechanisms that can reduce stigma against people with serious mental health concerns.

REFERENCES ASSOCIATED WITH THE CONTENT OF THIS TALK:

1. Wilson, C. S., Anthony, L., Kenworthy, L., Fleischman, R., Demro, C., Andorko, N., ... & Schiffman, J. (2020). Feasibility of psychosis risk assessment for adolescents diagnosed with autism. *Autism*, 24(4), 834-850.
2. Wilson, C., Kline, E., M Reeves, G., Anthony, L., & Schiffman, J. (2014). Blurred edges: evolving concepts of autism spectrum disorders and schizophrenia. *Adolescent Psychiatry*, 4(3), 133-146.
3. Foss-Feig, J. H., Velthorst, E., Smith, L., Reichenberg, A., Addington, J., Cadenhead, K. S., ... & Bearden, C. E. (2019). Clinical profiles and conversion rates among young individuals with autism spectrum disorder who present to clinical high risk for psychosis services. *Journal of the American Academy of Child & Adolescent Psychiatry*, 58(6), 582-588.

12:00pm – 12:15pm -----

Break, Platform Navigation, Expo Hall

12:15pm – 1:15pm BREAKOUT 4A & 4B -----

Breakout 4A – A Georgia CSC Team’s Secret Sauce for Success – Family Engagement

FACILITATOR / SESSION AND PANELIST INTRODUCTIONS



Krystal D. Fortney, MA, LPC-MHSP, NCC, Healthy Transitions Project Director, Tennessee Department of Mental Health and Substance Abuse Services (TDMHSAS)

PANEL MEMBERS



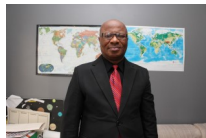
Ellen Dean, LCSW; State Project Coordinator, Coordinated Specialty Care for First Episode Psychosis, GA Department of Behavioral Health and Developmental Disabilities, Atlanta, GA

Beth Broussard, MPH, CHES; Associate Academic Research Scientist, Emory University School of Medicine; Director of Early Intervention for the Clinical & Research Program for Psychosis at Grady Health System, Atlanta, GA



Robert O. Cotes, MD; Associate Professor, Emory University School of Medicine; Director of the Clinical & Research Program for Psychosis at Grady Health System; Director, Project ARROW (Achieving Recovery through Resilience, Optimism, and Wellness) at Grady Health System, Atlanta, GA; Psychiatrist Expert for the American Psychiatric Association’s SMI Adviser

Chris Okpor, BS, CPS-P, CTC, CTRS; Family Peer Specialist, Project Arrow at Grady Health System, Atlanta, GA; Director, Pathways Behavioral Health Services, Nigeria



Xavier Spann, LPC, NCC; Behavior Health Program Manager, Grady Health System Adult Outpatient Unit; Former Team Lead and Lead Therapist, Project ARROW at Grady Health System; Men's Special Management Unit Manager, Atlanta City Detention Center, Atlanta, GA

SESSION DESCRIPTION:

Family engagement is a cornerstone of the long-term success of individuals who experience early psychosis. This is especially true as most young adults participating in coordinated specialty care (CSC) live with family members (Drapalski et al., 2018). Additionally, living alone or with nonparental family was found to be a predictor of early discharge in one statewide early intervention program (Mascyano et al., 2020). Family involvement improves outcomes (Marino et al., 2015) however, there is evidence of disparities in care. Based on data from RAISE, Black and Hispanic families were less likely to be offered family psychoeducation (Oluwoye et al., 2018). However, when early family contact occurs with a provider about psychosis it is associated with increased quality of life scores for Black CSC participants compared to white participants (Oluwoye et al., 2020). A team based in Atlanta, GA, Project ARROW, shares their experience serving a largely uninsured, diverse population of young adults and families. In this presentation, we discuss several strategies for how Project ARROW engages families, which include 1) striving toward cultural humility, 2) incorporating principles of Open Dialogue, and 3) utilizing the certified peer specialist parent role. Finally, we will conclude the session with a panel discussion focusing on supporting families and overcoming barriers in their engagement.

LEARNING OBJECTIVES:

At the conclusion of this session, participants will have:

1. Defined cultural humility and identified two cultural considerations for working with families on CSC teams;
2. Identified three key principles of Open Dialogue and explained how these principles may be adapted into a CSC team; and,
3. Defined the role of a certified peer specialist parent and describe how this role may be incorporated on a CSC team.

BIOGRAPHIC SKETCHES:

Ellen Dean, LCSW, | Ellen Dean is the State Project Coordinator for the Georgia Department of Behavioral Health and Developmental Disabilities LIGHT-ETP (Listening, Inspiring, Guiding Healthy Transitions – Early Treatment Programs) initiative for Coordinated Specialty Care, an innovative, team-based approach to mental health treatment for young adults with first-episode psychosis. She has worked in community mental healthcare settings for two decades and has been a clinical team lead, program manager, trainer, and consultant for OnTrackNY, New York State's CSC initiative. She has a private practice in Atlanta.

Beth Broussard, MPH, CHES | Beth Broussard is an Associate Academic Research Scientist at Emory University School of Medicine in the Department of Psychiatry and Behavioral Sciences. She is the Director of Early Intervention for the Clinical & Research Program for Psychosis at Grady Health System in Atlanta, Georgia. As a health educator, Ms. Broussard has led clinic-based health education and psychoeducation services for participants and their families. She is also the author of *The First Episode of Psychosis: A Guide for Young People and Their Families*, now in its second edition.

Robert O. Cotes, MD | Dr. Cotes is an Associate Professor at Emory University School of Medicine in the Department of Psychiatry and Behavioral Sciences. He is Director of the Clinical & Research Program for Psychosis at Grady Health System and serves as Director of Project ARROW (Achieving Recovery through Resilience, Optimism, and Wellness). Dr. Cotes is the Principal Investigator for multiple clinical trials focused on treatment options for psychosis. He serves as Psychiatrist Expert for the American Psychiatric Association's SMI Adviser initiative.

Chris Okpor, BS, CPS-P, CTC, CTRS | Chris Okpor is a Family Peer Specialist in Project Arrow of Grady Behavioral Health and a director in Pathways Behavioral Health Services, Nigeria. He uses his own experience as someone who has taken care of a relation with a mental health condition, to help young adults struggling with mental illness and their families navigate this often confusing and scary situation. Chris provides support for community linkage, and advocacy support for these young adults with mental illness and their families. Chris has a unique and valuable expertise to support family members, give them hope and let them know that recovery is possible. He assists young adults with completion of Wellness Recovery Action Plans (WRAP) and engages in Crisis Prevention and Management.

Xavier Spann, LPC, NCC | Xavier Spann is a Behavior Health Program Manager with Grady Health System Adult Outpatient Unit. He is the former Team Lead and Lead Therapist in Project ARROW, where he directed the day-to-day operations and coordinated services for the CSC team. Xavier is an ambassador for the CSC program. He consults with several law enforcement agencies to provide behavioral health interventions to offenders. He is the Men's Special Management Unit Manager for the Atlanta City Detention Center. Xavier is a content contributor to Male Media Mind, a grassroots movement serving the LGBTQI community.

REFERENCES ASSOCIATED WITH THE CONTENT OF THIS TALK:

Drapalski AL, Piscitelli S, Lee RJ, Medoff D, Dixon LB. Family Involvement in the Clinical Care of Clients With First-Episode Psychosis in the RAISE Connection Program. *Psychiatr Serv.* 2018 Mar 1;69(3):358-361. doi: 10.1176/appi.ps.201700080. Epub 2017 Nov 1. PMID: 29089013.

Oluwoye O, Stiles B, Monroe-DeVita M, Chwastiak L, McClellan JM, Dyck D, Cabassa LJ, McDonnell MG. Racial-Ethnic Disparities in First-Episode Psychosis Treatment Outcomes From the RAISE-ETP Study. *Psychiatr Serv.* 2018 Nov 1;69(11):1138-1145. doi: 10.1176/appi.ps.201800067. Epub 2018 Aug 28. PMID: 30152275; PMCID: PMC6395511.

Oluwoye O, Krieger L, Alcover KC, Compton MT, Cabassa LJ, McDonnell MG. The impact of early family contact on quality of life among non-Hispanic Blacks and Whites in the RAISE-ETP trial. *Schizophr Res.* 2020;216:523-525. doi:10.1016/j.schres.2019.12.004

Breakout 4B – Moving On: Transitions Following Coordinated Specialty Care

SESSION AND SPEAKER INTRODUCTION



Katrill B. Braden, MS, Supported Employment and Education Specialist CHRP, CMI Healthcare Services, Inc., Memphis, Tennessee

SPEAKER



Abram Rosenblatt, PhD, Vice President, Westat, Durham, North Carolina

SESSION DESCRIPTION:

Many coordinated specialty care (CSC) programs in the U.S. began following a Congressional mandate requiring states to direct ten percent of their Mental Health Block Grant (MHBG) allocation to support evidence-based programs that address the needs of individuals with early serious mental illness, including psychotic disorders. As these CSC programs mature, teams are faced with key programmatic decisions, such as determining optimal program length and what may be the most appropriate services for ongoing care. While National Institute of Mental Health guidance notes that a transfer out of the program should occur as soon as clinically appropriate and that the team will follow up to facilitate the transition to “routine community services,” the level of care of community services often falls well below those provided within the CSC model. This creates challenges: After an intensive investment in clients through CSC, how do programs ensure appropriate services continue? Funded by the Assistant Secretary for Planning and Evaluation (ASPE) within HHS, the study described in this presentation incorporates data from a survey of State Mental Health Agencies about post-CSC service policy; a national survey of CSC programs; an environmental scan; and nine case studies of CSC programs, including one site in Tennessee. Combining these sources, this presentation will a) describe a framework to classify program strategies of transitions and b) describe key approaches that illustrate innovative ways to implement continuity of care following a CSC program, including options such as step-down models, extended program length, and integration into other programs.

LEARNING OBJECTIVES:

At the conclusion of this session, participants will have:

1. Analyzed the problems associated with continuity of care for individuals with first episode psychosis who graduate from CSC programs;
2. Compared strategies to address continuity of care services; and,
3. Summarized implementation considerations for continuity of care services for CSC programs.

BIOGRAPHIC SKETCH:

Abram Rosenblatt, PhD | Dr Rosenblatt is Vice President at Westat, where he is sector lead for Child Welfare, Justice and Behavioral Health within the Behavioral Health and Health Policy Practice. Dr. Rosenblatt is currently the Principal Investigator of the NIMH funded Early Psychosis Intervention Network Data Coordinating Center. Previously, Dr. Rosenblatt was a Professor in the Department of Psychiatry at the University of California, San Francisco. He is the author or coauthor of numerous peer-reviewed publications focusing predominately on the costs and outcomes of multi-faceted systemic and programmatic interventions for children, youth and young adults with behavioral health needs.

1:15pm – 1:30pm -----

Break, Platform Navigation, Expo Hall

1:30pm – 3:00pm -----

CLOSING GENERAL SESSION

Collaboration and Partnerships Between Early Psychosis Programs

SESSION OPENING REMARKS AND INTRODUCTIONS



Krystal D. Fortney, MA, LPC-MHSP, NCC, Healthy Transitions Project Director, Tennessee Department of Mental Health and Substance Abuse Services (TDMHSAS)

PANEL MEMBERS



Kaelin Large, MSW, Team Lead, Alliance Healthcare Services, Memphis, Tennessee

Tariq Pettis-Smith, MACCP, Program Director for CHR-P, CMI Healthcare Services, Inc., Memphis, Tennessee



CLOSING REMARKS



Jessica Mullins, LMSW, Director, Youth & Young Adult Initiatives, Office of Children, Young Adults, and Families, Tennessee Department of Mental Health and Substance Abuse Services (TDMHSAS), Nashville, Tennessee

SESSION DESCRIPTION:

Psychosis is experienced on a spectrum, but how do mental health professionals and families identify young people who may be at risk for psychosis? And how do we educate the community about this phenomenon? In this session, you will learn creative ways to message and provide outreach to your community about psychosis. You will learn about how two programs housed within two different agencies collaborate in a joint mission to reduce stigma and the duration of untreated psychosis by providing services to young people at two different places on the psychosis spectrum.

LEARNING OBJECTIVES:

At the conclusion of this session, participants will:

1. Be able to explain the continuum from Clinical High Risk for Psychosis to First Episode Psychosis;
2. Have learned collaborative outreach strategies of both early psychosis programs and take away creative ideas to break the stigma about psychosis amongst providers, families, and the general community; and,
3. Have learned clinical model components of both the Clinical High Risk for Psychosis and First Episode Psychosis Programs.

BIOGRAPHIC SKETCHES:

Krystal D. Fortney, MA, LPC-MHSP, NCC, ACS | Krystal Fortney is a licensed professional counselor with a designation in mental health for the state of Tennessee; she is a National Certified Counselor, and an Approved Clinical Supervisor for counselors seeking LPC Licensure. Krystal enjoys working with youth and young adults and has over 8 years of experience working with co-occurring diagnosis, mood disorders, and young people who were diagnosed with psychosis. Krystal also has experience in providing consultation and technical assistance to mental health professionals specialized in early psychosis. She currently serves as the Project Director for the Healthy Transitions grant at The Tennessee Department of Mental Health and Substance Abuse Services.

Kaelin Large, MSW | Kaelin Large is a Licensed Masters Social Worker based in Memphis, TN. She received her Master's in Social Work from Union University in 2018. She has worked in a variety of settings, including housing, school social work, private practice, and community mental health clinics. She has a passion for treating trauma and working with youth and young adults to develop their identity and realize their full potential. She currently serves as the Team Lead for the OnTrack Team at Alliance Healthcare Services in Memphis, TN. When not at work, she can be found playing with her dogs or outside with a good book.

Tariq Pettis-Smith, MACCP | Tariq J. Pettis-Smith is a native of Memphis, Tennessee. He is currently the Program Coordinator for Clinical High-Risk for Psychosis (CHRP) at CMI Healthcare Services in Shelby County, Memphis, TN. He received his Master's degree in Community Clinical Psychology and Bachelor's degree in General Psychology. Over the years, he has developed a passion for youth and young adult mental health. His mission is to utilize his knowledge and experiences as a motivational tool to continue empowering communities to break the stigma of generational mental health challenges by incorporating topics of self-worth and self-efficacy. Overall, his purpose is to inspire families in the Shelby County community through his diligent work and efforts.

3:00pm-----

Adjourn for Day 2

SPEAKERS, PANELISTS, AND SESSION FACILITATION AND INTRODUCTIONS

Shira Agam, President, Executive Committee (Executive Board), Students With Psychosis, Canada

Melinda Baldwin, PhD, LCSW, Chief, Child, Adolescent, and Family Branch, Center for Mental Health Services, Substance Abuse and Mental Health Services Administration (SAMHSAS), Rockville, Maryland

Katrill B. Braden, MS, Supported Employment and Education Specialist CHRP, CMI Healthcare Services, Inc., Memphis, Tennessee

Aaron P. Brinen, PsyD, Assistant Professor of Clinical Psychiatry & Behavioral Sciences, Director of Residency Training in Psychotherapy, Nashville, Tennessee

Beth Broussard, MPH, CHES; Associate Academic Research Scientist, Emory University School of Medicine; Director of Early Intervention for the Clinical & Research Program for Psychosis at Grady Health System, Atlanta, GA

Emily Byers, CPRS, Recovery Coach, Department of Psychiatry & Behavioral Sciences, Psychosis and Addictions Programs, Nashville, Tennessee

Emeka Chima, Secretary (Executive Board), Students With Psychosis, Maryland

Robert O. Cotes, MD; Associate Professor, Emory University School of Medicine; Director of the Clinical & Research Program for Psychosis at Grady Health System; Director, Project ARROW (Achieving Recovery through Resilience, Optimism, and Wellness) at Grady Health System, Atlanta, GA; Psychiatrist Expert for the American Psychiatric Association's SMI Adviser

Ellen Dean, LCSW; State Project Coordinator, Coordinated Specialty Care for First Episode Psychosis, GA Department of Behavioral Health and Developmental Disabilities, Atlanta, GA

Krystal D. Fortney, MA, LPC-MHSP, NCC, Healthy Transitions Project Director, Tennessee Department of Mental Health and Substance Abuse Services (TDMHSAS)

Shaynna Herrera, PhD, Instructor of Psychiatry, Icahn School of Medicine / Project Director, Psychosis Risk Program, The Mount Sinai Hospital, New York, New York

Kaelin Large, MSW, Team Lead, Alliance Healthcare Services, Memphis, Tennessee

Emily Lichvar, PhD, Public Health Advisor, Child, Adolescent, and Family Branch, Center for Mental Health Services, Substance Abuse and Mental Health Services Administration (SAMHSA), Rockville, Maryland

Cecilia McGough, Founder & Executive Director, Students With Psychosis, New York, New York

Lewis Mehl-Madrona, MD, Medical Director, Wabanaki Public Health, Maine

Aubrey M. Moe, PhD, OSU Early Psychosis Intervention Center, Assistant Professor, Departments of Psychiatry and Behavioral Health and Psychology, The Ohio State University Wexner Medical Center, Columbus, Ohio

Morgan Morris, Youth & Young Adult Coordinator, Office of Children, Young Adults, and Families, Tennessee Department of Mental Health and Substance Abuse Services (TDMHSAS), Nashville, Tennessee

Jessica Mullins, LMSW, Director, Youth & Young Adult Initiatives, Office of Children, Young Adults, and Families, Tennessee Department of Mental Health and Substance Abuse Services (TDMHSAS), Nashville, Tennessee

Chris Okpor, BS, CPS-P, CTC, CTRS; Family Peer Specialist, Project Arrow at Grady Health System, Atlanta, GA; Director, Pathways Behavioral Health Services, Nigeria; cuokpor@ghm.ed

Baileigh Renfrow, Executive Board, Students With Psychosis, USA

Abram Rosenblatt, PhD, Vice President, Westat, Durham, North Carolina

Jason Schiffman, PhD, Professor, Director of Clinical Training, and Director, YouthFIRST, Department of Psychology, University of Maryland Baltimore County (UMBC), Baltimore, Maryland

Julia Sheffield, PhD, Assistant Professor of Psychiatry & Behavioral Sciences, Jack Martin MD Research Professor in Psychopharmacology, Nashville, Tennessee

Tariq Pettis-Smith, MACCP, Program Director for CHR-P, CMI Healthcare Services, Inc., Memphis, Tennessee

Xavier Spann, LPC, NCC; Behavior Health Program Manager, Grady Health System Adult Outpatient Unit; Former Team Lead and Lead Therapist, Project ARROW at Grady Health System; Men's Special Management Unit Manager, Atlanta City Detention Center, Atlanta, GA; xspann@gmh.ed

Hailey Terry, OnTrack Recovery Coach, Carey Counseling Center, Paris, Tennessee

Marie Williams, LCSW, Commissioner, Tennessee Department of Mental Health and Substance Abuse Services (TDMHSAS), Nashville, Tennessee

Travina Wynn, MSW, Supported Employment & Education Specialist, Mental Health Cooperative, Nashville, Tennessee

ADDITIONAL EVENT DETAILS

Please visit <https://www.tamho.org/tennessee-statewide-ep-chrp-virtual-conference> to access additional information including, but not limited to:

- Continuing Professional Development
- EXPO Hall – EP-CHRP Service Providers
- EXPO Hall – Self-Care Booths
- Downloadable Session Handouts
- Evaluation Forms and Request for Documentation of CEs Earned

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THIS PROJECT WAS DEVELOPED UNDER FEDERAL GRANT NUMBER 5H79SM081194, FEDERAL AWARD IDENTIFICATION NUMBER (FAIN) H79SM081194 FROM THE SUBSTANCE ABUSE AND MENTAL HEALTH SERVICES ADMINISTRATION (SAMHSA), U.S. DEPARTMENT OF HEALTH AND HUMAN SERVICES (HHS). THE VIEWS, POLICIES, AND OPINIONS EXPRESSED ARE THOSE OF THE AUTHORS AND DO NOT NECESSARILY REFLECT THOSE OF SAMHSA OR HHS.