



Program Guide

Yakima, WA | October 4-6, 2026

Planning Our Journey Together

Fred G. Redmon / Selah Creek Bridge
Yakima County, WA

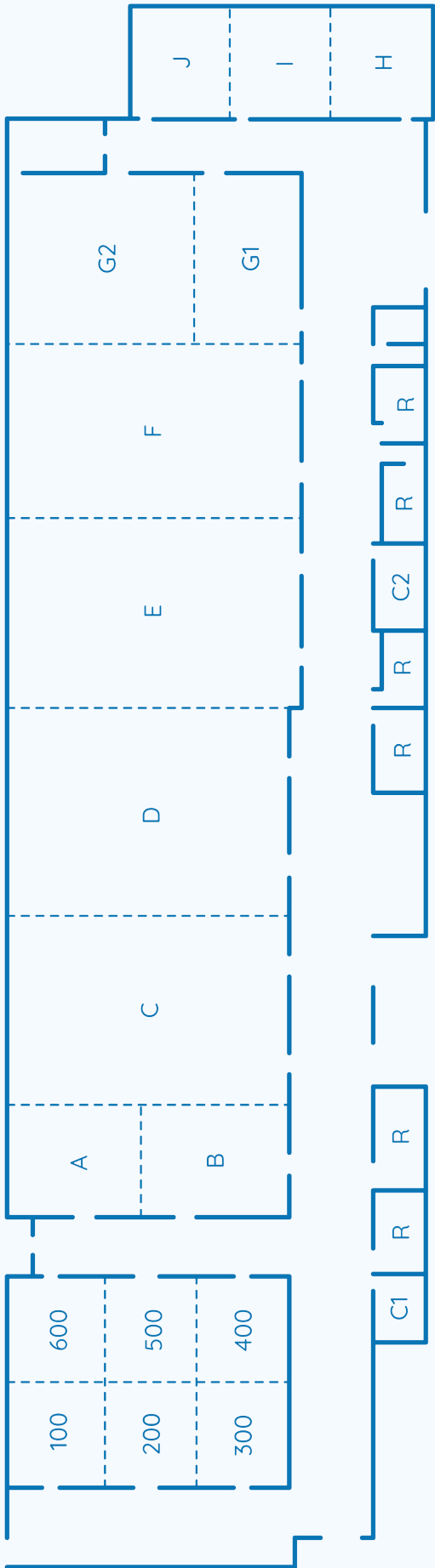
Yakima Convention Center

Map



Kathy Coffey South Ballroom

Senator Alex Deccio Ballroom



Outdoor Plaza

8th St.

Table of Contents

Yakima Convention Center Map	2
Table of Contents	3
Conference Agenda at a Glance	4
Pre-Conference Presentations	7
Keynote Speakers	8
Award Recipients	11
Day One Workshops	13
Day Two Workshops	22
Committee Members	26
Sponsors and Exhibitors	28



Conference Agenda

at a Glance

Sunday, October 4
Pre-Conference

Time	Event
8:00 AM	PRE-CONFERENCE REGISTRATION & BREAKFAST
9:00 - 12:00 PM	Morning Sessions Part 1
12:00 - 1:00 PM	LUNCH
1:00 - 4:00 PM	Afternoon Sessions Part 2
4:00 PM	END OF PRE-CONFERENCE

Conference Agenda

at a Glance

Monday, October 5
Day One

Time	Event
7:30 AM	REGISTRATION & BREAKFAST
8:00 - 8:30 AM	WELCOME/HOUSEKEEPING
8:30 - 9:30 AM	Plenary 1 Tonier Cain (Room C/D)
9:30 - 9:45 AM	BREAK
9:45 - 11:00 AM	Workshop 1 Sessions
11:00 - 11:15 AM	BREAK
11:15 - 12:15 PM	Plenary 2 Sam DeMello (Room C/D)
12:15 - 1:15 PM	LUNCH
1:15 - 2:30 PM	Workshop 2 Sessions
2:30 - 2:45 PM	BREAK
2:45 - 3:45 PM	Plenary 3 David McSperitt & Marty Harris (Room C/D)
3:45 - 4:00 PM	BREAK
4:00 - 5:15 PM	Workshop 3 Sessions
5:15 PM	END OF DAY ONE

Conference Agenda

at a Glance

Tuesday, October 6
Day Two

Time	Event
7:30 AM	REGISTRATION & BREAKFAST
8:00 - 8:15 AM	WELCOME/HOUSEKEEPING
8:15 - 9:15 AM	Plenary 4 Maia Szalavitz (Room C/D)
9:15 - 9:30 AM	BREAK
9:30 - 10:45 AM	Workshop 4 Sessions
10:45 - 11:00 AM	BREAK
11:00 - 11:30 AM	Awards
11:30 - 12:45 PM	LUNCH
12:45 - 2:00 PM	Plenary 5 Donnie Goodman & Genell Hennings (Room C/D)
2:00 PM	END OF CONFERENCE

Room A/B



P:A Ethics and the Law

Judy Holman, LICSW, LMHC, SUDP

The workshop will cover the Counselor's Code of Ethics, laws governing counseling and ethical decision-making, and the ethical decision process. The training is interactive with trainee engagement and discussion.

Clinicians in the State of Washington are required to be trained in Ethics and Law. This course will cover the meaning and purpose of ethics and examine ethical principles across several different clinical professions. We will practice making ethical decisions in interactive discussions. Unprofessional conduct will be discussed and the consequences that may take place when not adhering to professional ethics. We will also cover the Revised Code of Washington (RCW) and Washington Administrative Codes (WAC) that guide treatment and professionals.

Room 300



P:B Helping Your Client Through a Suicide Emergency

Sabrina Votava, MA, LMHC

This course is designed for professionals needing training on how to screen for, assess, manage, and treat suicide risk. Come ready to learn, participate, and demonstrate your newly acquired skills. Topics covered include language around suicide, our readiness and experiences, risk and protective factors for suicide, the scope of the problem of suicide, groups at higher risk, warning signs for suicide, intervention steps including risk assessment and safety planning, a discussion of means restriction and safety, treatment options, local and national resources, and practice.

Keynote Speakers

October 5

Day One | 8:30 AM

Healing Neen

Tonier Cain • Plenary 1

After surviving a childhood of abuse and neglect, Tonier “Neen” Cain lived on the streets for two nightmarish decades, where she endured unrelenting violence, hunger, and despair while racking up 66 criminal convictions related to her addiction. Incarcerated and pregnant in 2004, treatment for her lifetime of trauma offered her a way out... and up. Her story illustrates the consequences that untreated trauma has on individuals and society at large, including mental health problems, addiction, homelessness and incarceration. Today, she is an internationally renowned speaker and educator on the devastation of trauma and the hope of recovery.



This plenary is brought to you by Northwest ATTC.



Day One | 11:15 AM



The Hidden Co-Occurrence: Why Gambling Harm Goes Undetected in Behavioral Health Settings

Sam DeMello • Plenary 2

Gambling harm is one of the most under-identified co-occurring conditions in behavioral health. It rarely presents on its own, and it's rarely screened for, even in settings already treating substance use and mental health conditions. People experiencing gambling harm often show up first in opioid treatment programs, primary care, and mental health settings, not gambling-specific services, and most clinicians have no structured way to detect or address it.

Drawing on his own recovery, Sam DeMello connects personal experience to Evive's work delivering gambling harm screening and support directly through opioid treatment program sites in Nevada, funded by a first-of-its-kind SAMHSA grant for gambling intervention. We'll cover what it actually looks like to integrate gambling harm screening into a setting built around a different primary diagnosis: the clinical and logistical barriers, what worked, what didn't, and what other co-occurring disorder providers can take from it. Attendees will leave with a practical framework for recognizing gambling harm alongside other conditions and a real-world model for reaching people who would never seek out gambling-specific treatment on their own.

Keynote Speakers

October 5

Day One | 2:45 PM

Community Safety/Violence Prevention

David McSperitt & Marty Harris • Plenary 3

This presentation will provide an overview of community safety and violence prevention efforts, highlighting strategies that support youth and young adults and promote safer schools and communities. Participants will learn about collaborative efforts with schools, cities, and community organizations across King County, as well as approaches to building strong community partnerships and creating environments where young people can thrive.



October 6

Day Two | 8:15 AM



How Harm Reduction Saved My Life

Maia Szalavitz • Plenary 4

Through a warm, moving, emotional narrative, Szalavitz shows how being taught to clean her needles with bleach not only protected her from HIV, but helped her move towards recovery because of her outrage at the failure of society to care for people with addiction. This presentation explains why harm reduction—far from “enabling” or extending addiction—is actually the best way to spur health and recovery.

Keynote Speakers

October 6

Day Two | 12:45 PM

Bridging the Gap: A Free Master's Path in Counseling

Donnie Goodman & Genell Hennings • Plenary 5

The YMCA + Heritage University Master's in Mental Health Counseling Program was developed to address the growing shortage of master's-level behavioral health clinicians while creating pathways to graduate education for individuals from historically underrepresented communities. This tuition-free partnership prepares future clinicians through rigorous academic training, comprehensive support services, and practical learning experiences grounded in real-world behavioral health practice.

Participants in the program develop competencies in trauma-informed care, harm reduction, crisis intervention, de-escalation strategies, evidence-based therapeutic approaches, and clinical documentation. Training includes Motivational Interviewing, Cognitive Behavioral Therapy (CBT), Dialectical Behavior Therapy (DBT), and CBT for Psychosis, equipping graduates to effectively support individuals with complex behavioral health needs.

A central component of the curriculum is the concept of the "golden thread," emphasizing the alignment of assessment, treatment planning, interventions, progress documentation, and measurable outcomes. Through this framework, the program strengthens clinical effectiveness while promoting high-quality, person-centered care.

This presentation will highlight the program's innovative approach to workforce development, its impact on expanding access to behavioral health careers, and its role in cultivating culturally responsive clinicians who reflect and understand the diverse communities they serve.



AMERICAN
BEHAVIORAL HEALTH SYSTEMS
★ ★ ★ ★ ★ ★ ★ ★ ★ ★ ★ ★ ★ ★

Award Recipients



Judy Holman • Lifetime Achievement Award

Judy Holman brings more than 34 years of experience and dedication to the behavioral health field, with a career spanning counseling, clinical practice, administration, and state-level leadership. She holds an Associate's Degree in Addiction, a Bachelor's in Social Work, and a Master's in Social Work.

Throughout her career, Judy has worked in a variety of behavioral health settings and with the Washington State Departments of Social and Health Services and Health. She has a deep passion for education and professional development, having taught on topics including Ethics, Law, Cultural Competency, Individual Service Plans, and the Golden Thread. For more than 11 years, she has shared her expertise as an educator at the State Co-Occurring Disorder and Treatment Conference, helping strengthen the knowledge and skills of behavioral health professionals across Washington.

After retiring from the Department of Health in May 2023, Judy founded her own consulting and training business, allowing her to continue supporting organizations and professionals through customized education and guidance. Her commitment to collaboration, equitable care, and improving outcomes for underserved populations has made her a respected leader and advocate in the behavioral health community.

Judy's career reflects not only extensive knowledge and experience, but also a remarkable commitment to helping others grow and strengthening the behavioral health workforce. She also enjoys giving back through annual volunteer work with the U.S. Forest Service.



Abe Gardner • Outstanding Service Award

Abe Gardner is the Emergency Prevention Specialist with the North Mason Regional Fire Authority (NMRFA) with a lifelong commitment to serving the Mason County community. Born and raised in Shelton, Washington, Abe graduated from Shelton High School in 2000 and earned a Bachelor of Arts degree from The Evergreen State College in 2018. He is also a Washington State Certified Peer Counselor.

Abe has more than 10 years of experience working in mental health and chemical dependency services. Prior to joining the Fire Authority in February 2022, he spent five years with Mason County Public Health, where he helped develop, coordinate, and implement programs including the Mason County Overdose Prevention and Narcan Distribution Program, Substance Use Mobile Outreach, Law Enforcement Assisted Diversion (LEAD), Jail MAT/Re-entry, and the Behavioral Health Navigator Program. At the NMRFA, Abe is a member of the innovative Mobile Integrated Health Program where he specializes in providing resource navigation and peer support services.

Abe is passionate about advocating for vulnerable individuals and creating solutions where resources are limited. Through his work, he has helped bridge gaps in services and bring hope to people experiencing homelessness, severe behavioral health challenges, substance use disorders, and the unique challenges of living in rural communities. He continues to be a strong advocate for overdose prevention and is a lead organizer of Mason County's Overdose Awareness event.

Abe is married to his wife, Lisa, and they have two children, Annabelle and Donald, along with their German Shorthaired Pointer, Ronan. In his spare time, Abe enjoys hunting, fishing, golfing, and bowling.



Award Recipients



David Flack • Outstanding Service Award

David Flack has dedicated nearly 25 years to the field of behavioral health as a Licensed Mental Health Counselor (LMHC) and Substance Use Disorder Professional (SUDP), working exclusively with adolescents and young adults. Throughout his career, he has specialized in serving youth facing complex challenges, including substance use disorders, co-occurring mental health conditions, homelessness, trauma, and involvement in the legal system.



For many years, David worked within King County treatment programs, building a reputation for engaging young people who were often considered difficult to reach. His approach is grounded in genuine respect, compassion, and humor, helping countless youth navigate complicated life circumstances and move toward recovery and stability. For the past decade, he has continued this work in private practice, supporting higher-acuity teens and young adults as they heal from trauma, substance use, behavioral addictions, and experiences of marginalization.

Beyond his clinical work, David is a highly regarded trainer and presenter whose dynamic professional development programs have enriched the field and strengthened the skills of countless practitioners. He has also contributed his time and expertise to numerous planning committees responsible for conferences, training events, and other opportunities that advance the behavioral health workforce.

David's unwavering commitment to serving hard-to-engage youth, including homeless and LGBTQ+ adolescents, combined with his longevity, wisdom, and enduring sense of humor, has left a lasting impact on both the profession and the individuals he serves. His dedication over the past 25 years exemplifies excellence in chemical dependency treatment and adolescent behavioral health care.



Connecting people to work that matters.

We have the flexibility and resources to work with any type of healthcare facility or education setting.

Our priority is to understand the staffing difficulties you face, and become an extension of your internal workforce strategy.



Local presence, national reach



A leading partner in staffing solutions for over 35 years



Recognized by Forbes as a top temp staffing agency

Room 300



1:A When Survival Looks Like Resistance: Reframing “Noncompliance” in Co-Occurring Treatment

Carmela Maxell, PsyD, MBA, MA, LMHC, SUDP-T

Clients with co-occurring mental health and substance use disorders are frequently described as resistant, noncompliant, manipulative, avoidant, or treatment-interfering. Yet many of these behaviors are more accurately understood as adaptive survival strategies developed in response to trauma, institutional involvement, systemic adversity, and chronic stress.

This presentation challenges participants to reconsider common clinical assumptions by examining behavior through a trauma-informed and systems-aware framework. Attendees will explore how trauma exposure, justice involvement, substance use, attachment injury, and emotional dysregulation shape behaviors that are often misunderstood in behavioral health settings. Practical strategies will be presented to reduce power struggles, strengthen therapeutic alliance, increase engagement, and improve treatment outcomes. Participants will leave with concrete tools to distinguish behavioral pathology from protective adaptation and to respond to clients with greater curiosity, compassion, and clinical effectiveness.

Room 200



1:B Reframing Reality: How Perspective Influences Our Mental State

Isaac Watts, CPC

Reframing Reality: How Perspective Influences Our Mental State explores how our experiences, identities, assumptions, trauma histories, culture, relationships, and environments shape the way we interpret ourselves, other people, and the world around us. This presentation invites participants to examine the “lenses” they carry, how those lenses affect emotional responses and interactions, and how intentional perspective-shifting can support empathy, resilience, self-awareness, and more effective connection with others. Through storytelling, humor, reflection, and practical examples, participants will consider how reframing is not about denying reality or forcing positivity. Instead, it is about widening the frame so we can respond with more curiosity, compassion, and clarity.

Room 100



1:C Beyond Compliance: Building Trauma-Informed Systems of Care

Leah Merle Batty, PhD, LMHC, MHP, CMHS

Many behavioral health organizations identify as trauma-informed, yet staff continue to experience burnout, compassion fatigue, secondary traumatic stress, and turnover. While significant attention has been given to understanding and treating trauma in clients, less attention is often given to the ways trauma and chronic stress can manifest within organizational systems, workplace cultures, and the behavioral health workforce.

This presentation explores the difference between trauma-informed compliance and truly trauma-responsive systems of care. Drawing upon leadership experience across community mental health, substance use treatment, higher education, and behavioral health administration, Dr. Merle examines how organizational environments can either promote healing and resilience or unintentionally contribute to workforce distress, disengagement, and turnover.

Workshop One

October 5

Day One | 9:45 - 11:00 AM

Room A

1:D From Collaboration to Change: Inspiring Hope Through Whole-Person Recovery

Judge Melissa Hemstreet & Tanya Sturm, MBA, SUDP



Individuals involved in the justice system often face complex, interconnected challenges, including substance use disorders, co-occurring mental health conditions, trauma, housing instability, unemployment, and chronic health needs. Too often, fragmented systems address these issues in isolation, resulting in repeated cycles of crisis, treatment, homelessness, and incarceration.

This presentation demonstrates how coordinated, recovery-oriented partnerships can transform outcomes by addressing the whole person rather than a single diagnosis or system of need. Bringing together the perspectives of a therapeutic court judge, court coordinator, behavioral health treatment provider, best practice leader, and funding advocate, the session highlights how collaborative leadership creates sustainable pathways to recovery while balancing accountability, public safety, equitable access to care, and responsible stewardship of public resources.

Room B



1:E Kratom Use in Teens and Young Adults: What Professional Helpers Should Know

David Flack, MA, LMHC, SUDP

Kratom is quickly becoming a popular “gas station drug” among teens and young adults. Even though it has the potential to be highly addictive, it’s mostly unregulated, readily available, and often overlooked in treatment settings. We’ll start this presentation by increasing our knowledge about kratom and explore reasons kratom has become so popular so quickly among teens and young adults—including easy access, lack of regulation, and perceptions of safety. Along the way, we’ll identify specific initial interventions appropriate for teens and young adults using this substance. Whether you’re a drug counselor, mental health therapist, or other professional helper, this presentation will help you effectively address this emerging concern.

Room G1

1:F Certified Peer Support Services in Washington State

Shelly Shor, LICSW, PhD, CPC; Mo Bailey, BSW, CPC & Ted Dale, CPC



In this presentation we will share information about the current application of peer support in Washington State to include an overview of the core principles, current trainings, supervision requirements, and the evidence base behind the peer profession. We will then provide details about the credentialing process. The presentation will conclude with a Q&A opportunity with representatives from the Health Care Authority’s Peer Support Program and from the Department of Health.

Room G2

1:G Myth-busting Misconduct: Separating Fact from Fiction in Behavioral Health

Claire Wilson, MA & Carmen Moore



Will you get fired for reporting your supervisor? Can you go out for a drink after work? Should you allow clients to follow your social media accounts? Who should you report a violation to? What happens if someone files a complaint about you? This session aims to unpack the myths, rumors, and questions that often arise for behavioral healthcare providers. Through a review of current misconduct data trends and common complaints, Department of Health staff will explore some of the questions that come up for providers, facilitate discussion, and allow providers to deepen their understanding of legal and ethical responsibilities. The session will include insights from DOH staff involved in different parts of the discipline, auditing, and reporting process, offering insight to a process that can be intimidating and misunderstood. DOH speakers hope that participants will leave the session with more confidence to navigate the laws, rules, professional responsibilities, and overall enforcement process.

Room H/I

1:H The ASAM 4th Edition Criteria: Changes and Implementation in Washington State for Adult and Adolescent and Transition Aged Youth

Irene Hauzinger, PhD, SUDP; Chloe Wilkins, LICSW, SUDP & Amanda Lewis



The ASAM Criteria, 4th Edition makes a substantial shift in the conceptualization and delivery of addiction treatment. Washington State will be adopting both the Adult and Adolescent and Transition-Aged Youth (ATAY) Volumes on January 1, 2028. This workshop will address the changes, the infrastructure needed to facilitate the changes, and the state's timeline and technical assistance offerings. Come learn, ask questions, and share your feedback regarding the upcoming transition into the 4th Edition Criteria in Washington State.

Workshop Two

October 5

Day One | 1:15 - 2:30 PM

Room A

2:A Substance Use, Mental Health, and the Overlap with Problem Gambling/Gambling Disorder: What Clinicians Need to Know

Roxane Waldron, MPA & Tana Russell



The rapid expansion of online and mobile gambling, including sports wagering and prediction markets, is contributing to a growing public health concern. Adolescents and young adults are particularly vulnerable to developing gambling-related problems, making early identification and intervention more important than ever.

This session will equip behavioral health professionals with practical strategies to screen, identify, and refer individuals experiencing gambling and gaming-related concerns. Participants will explore the impact of problem gambling on individuals and their families, examine the intersection of gambling disorders with other co-occurring behavioral health conditions, and learn how treatment approaches compare. The training will introduce brief, validated screening tools that can be easily integrated into existing intake processes and provide an overview of assessment, treatment, and referral resources available throughout Washington State, including the State Problem Gambling Program, Medicaid-covered services, and Tribal behavioral health programs. An interactive Q&A, including becoming a Certified Gambling Counselor and contracting with the State Problem Gambling Program for treatment reimbursement will conclude this presentation.

Room B



2:B Combating Stigma: A Training to Build Awareness and Support in Preventing Veteran Suicide

Don Seese, MSW

This session will explore some of the stigmas that service members, veterans, and family members (SMVF) experience in and out of the service. Stigma remains a significant barrier to seeking help, contributing to isolation, misinformation, and lack of access to essential mental health services. The training focuses on understanding the types of stigma (self, public, and institutional), how stigma impacts mental health, and practical steps to reduce its presence. Participants will engage in meaningful discussion to challenge and address stigma, foster supportive peer networks, and promote help-seeking behavior.

Room G1



2:C Worth Beyond Usefulness: Building Neurodivergent-Affirming Systems Where Providers and Clients Can Thrive

Leah Merle Batty, PhD, LMHC, MHP, CMHS

This presentation introduces *Worth Beyond Usefulness* as a framework for considering how neurodivergent-affirming, trauma-informed, and equity-centered approaches can transform behavioral health systems from places focused primarily on survival to environments that cultivate connection, belonging, resilience, and growth. Drawing upon experience and emerging research, Dr. Merle invites participants to examine how assumptions about productivity, functioning, compliance, and “normality” can shape both treatment and workplace culture.

Participants will leave with practical strategies for reducing stigma, supporting neurodivergent individuals, fostering psychological safety, and creating more inclusive systems where both providers and clients can move beyond survival and thrive.

Room G2

2:D Incentivizing Change: The Evolution and Next Wave of Contingency Management Across Washington

Lora Weed, PhD, LMHC, MHP, SUDP, CMHS & Amy Dura, LMHC, SUDP, CMHS



Stimulant Use Disorder (SUD) involving methamphetamine and cocaine is driving a surge in overdose rates across Washington State. With zero FDA approved pharmaceuticals available for SUD, behavioral interventions serve as the frontline defense. This presentation examines how Washington became a national leader in scaling Contingency Management (CM)—an evidence-based behavioral therapy that uses immediate, tangible rewards to reinforce stimulant-negative urine drug screens and boost treatment retention. Attendees will explore the operational journey from navigating federal anti-kickback statutes to launching a standardized, legally compliant 12-week protocol under the state's Section 1115 Medicaid Demonstration Waiver. Finally, the session will highlight future initiatives to transform CM into a permanent Medicaid benefit and expand the incentive model to address concurrent alcohol and opioid use.

Room H/I



2:E Supporting Perinatal Mental Health and Substance Use Disorder through Basic Needs

Camille Koops

This presentation will cover how Help Me Grow Washington (HMG WA) supports pregnant and postpartum people experiencing substance use disorder (SUD) by providing specialized wraparound resource navigation and support. As behavioral health conditions are the leading cause of pregnancy-related deaths in WA state, it is vital to equip parents with SUD in getting the support and resources they need to reduce barriers, support their health, and safely parent their children. By implementing a holistic, strengths-based approach that includes not only the newborn but also the birthing parent, their household, and the other supportive people in their lives, we focus on prevention. As we “plan our journey together,” we will end the session by inviting attendees to think about how we can collaborate in reaching and connecting perinatal families experiencing SUD across the state to care, increasing their resiliency and strengths.

Room 300



2:F Holding Space: The Role of Environment in Treatment Outcomes

Ryan Drzewiecki, PsyD, LP

Across levels of care, treatment is often defined by therapy models and medication management. However, clients spend the majority of their lives outside of formal clinical encounters, embedded in environments that continuously shape behavior, reinforce patterns, and influence outcomes. This presentation reframes environment as the single most important active treatment modality at any level of care. Participants will explore how factors such as daily structure, staff interactions, language, peer dynamics, and physical space function as “invisible treatment,” either amplifying or undermining clinical interventions. The session will examine how the role of environment shifts across levels of care, from highly structured residential settings to less controlled outpatient contexts, and why this distinction is critical for treatment planning and outcomes.

Room 200



2:G Beyond the Silo: Community-Based Responses to Co-Occurring Mental Health, Substance Use, Housing, and Justice-System Involvement **Maurece Graham-Bey**

People with co-occurring needs rarely experience crisis within only one system. Housing instability, trauma, substance use, mental health symptoms, chronic health needs, developmental disabilities, and justice-system involvement often interact. This interactive workshop introduces a cross-sector stabilization framework grounded in Housing First, harm reduction, peer recovery support, motivational engagement, overdose prevention, and warm handoffs.

Using a composite Washington case, participants will identify immediate needs and referral points, map a coordinated pathway across community and licensed systems, and practice language that protects dignity, choice, and continued engagement. Attendees will leave with an engagement checklist, a stabilization-pathway worksheet, and warm handoff prompts. The session maintains clear boundaries between non-clinical stabilization, peer support, and licensed treatment while showing how community-rooted work can strengthen continuity of care and reduce avoidable system failures.

Room 100



2:H Raising Awareness About Co-Occurring Disorders and Treatment Across All Communities **Willard DeRouen Jr.**

This presentation focuses on raising awareness and increasing understanding of co-occurring disorders, while addressing the stigma, misconceptions, and barriers that can prevent individuals and families from seeking the support they need. Co-occurring disorders occur when a person experiences both a mental health condition and a substance use disorder, creating complex challenges that can affect emotional well-being, relationships, physical health, employment, housing, family stability, and overall quality of life. By increasing awareness and understanding, we can move beyond judgment and begin to see the whole person, including their strengths, resilience, lived experiences, and potential for recovery.

A central focus will be creating a more compassionate and person-centered approach to recovery. Participants will learn about the value of listening without judgment, building trust, honoring individual strengths, and supporting people in making informed decisions about their own recovery journeys. The presentation will emphasize that recovery does not follow one specific path and that individuals may require different combinations of clinical services, peer support, family involvement, community resources, harm-reduction strategies, and other supports to achieve their personal goals.

The presentation will also examine the importance of culturally responsive, accessible, and inclusive care. Cultural background, family experiences, community connections, socioeconomic factors, and past experiences with healthcare or other systems can significantly influence how individuals understand mental health, substance use, treatment, and recovery. By recognizing these differences and creating environments where people feel respected, heard, and valued, service providers and communities can build stronger relationships and improve engagement in care.

Workshop Three

October 5

Day One | 4:00 - 5:15 PM



Room A

3:A Post-overdose Support and the Role of Community

Sarah Melfi-Klein

This presentation covers how loved ones can play an integral role in helping someone heal after a nonfatal overdose. The presenter is a co-author of the Post-overdose survival toolkit for loved ones, published by Washington State Health Care Authority (HCA) Division of Behavioral Health and Recovery (DBHR) in partnership with Health Management Associates (HMA). Inspired by the personal experience of the presenter, this resource and presentation seek to guide family, caregivers, and other loved ones who want to deepen their understanding of overdose, substance use disorder, and the resources available to people who use drugs.

A nonfatal overdose can present an important opportunity for individuals to make a change that prioritizes their well-being, and that can be reinforced by loved ones and community. The toolkit, and the content of this presentation, challenge the “tough love” narrative that has been widely accepted as a way to regard loved ones dealing with addiction. Instead, the presenter will provide evidence and experientially informed methods to engage someone you care about in their own healing process after an overdose and uplift the importance of community in affecting positive change on a personal and systemic level.

Room B

3:B From Group Room to Real World: Using Work Experience to Strengthen Recovery

Theresa Scott, LMHC & Jason Person, MA, CRC



Traditional residential treatment often teaches valuable recovery skills within the safety of the treatment environment, yet many individuals struggle to apply those skills when faced with the demands of everyday life. This presentation explores an innovative approach that intentionally bridges the gap between treatment and real-world living by integrating structured work experiences into a co-occurring residential treatment program.

This presentation will examine how integrating work skills into treatment strengthens motivation, increases engagement, builds self-efficacy, and helps individuals develop confidence in their ability to maintain recovery beyond residential care.

Room G1



3:C Autism and Addiction

MaryAnne Murray, DNP, EdD, PMHNP-BC, FNP-BC, CARN-AP

The incidence of Autism Spectrum Disorder diagnoses has increased dramatically over the past several decades. Whereas we previously believed that one male in 350 was on the Autism Spectrum, current statistics tell us that one person in 35, of all genders, is Autistic. Because of the unique challenges they face in living in a world not geared to their needs, Autistic people are likely to use substances recreationally and indulge behavioral addictions to help them cope. Our substance use disorder treatment programs rely heavily on group work which is particularly difficult for people on the Autism spectrum. In this session we will explore ways we can improve our understandings and better adapt our primary care, mental health, and substance use disorder treatment practices to more effectively meet the needs of Autistic people.

Workshop Three

October 5

Day One | 4:00 - 5:15 PM

Room G2

3:D Recovery That Lasts: The Power of Housing, Employment, and Connection

Lisa Bennett-Perry, Mo Bailey, BSW, CPC & Mary Diaz Cruz

This presentation explores how the power of community engagement, housing, employment, and education contribute to overall wellness and increase recovery tenure. This presentation emphasizes a person-centered, strength-based approach, empowering people to see the possibilities beyond treatment. Participants will learn about strategies for building community connection, overcoming barriers to work and education, and connecting with local resources that promote recovery. The presentation will conclude with a Q&A opportunity for participants to ask questions of the presenters.



Room 300



3:E Behavioral Addictions in Teens

David Flack, MA, LMHC, SUDP

Behavioral addictions—such as excessive gaming, problematic pornography use, and online gambling—have been on the rise since the pandemic, especially among teens. Unfortunately, very few counselors have any training or practical experience treating them. This highly interactive presentation will help change that. We'll start by identifying common behavioral addictions in teens, exploring reasons they develop, examining the role of dopamine, and more. Next, we'll apply this information by taking a deeper look at problematic pornography use, with attention given to the unique challenges of addressing this behavioral addiction in teens. Along the way, we'll identify some practical first steps for addressing behavioral addictions in teens.

Room H/I

3:F Streamlining Access to the Crisis Care Continuum through Collaboration

Matthew Gower, CPC & Lonnie Peterson

This workshop will update attendees on the progress of implementing 988 and the hub designation process. It will cover the vertical alignment of RCLs and 988 Hubs and how this reduces barriers for help seekers to get help, streamline training and funding, and reduces the impact of not having a technology solution. This workshop will discuss efforts to collaborate and engage partners to improve the 988-hub/RCL experience. This includes developing strategic partnerships among the state partners, BH-ASOs, and Hubs/RCLs. Through these optimizations, help seekers will have greater access to the crisis care continuum. This workshop will cover the initiatives that improve access to the crisis care continuum including endorsement, rural health transformation, and ongoing process improvements.



Workshop Three

October 5

Day One | 4:00 - 5:15 PM

Room 200



3:G In the Moment That Matters: Responding to Mental Health Crisis with Confidence

Tim Victorella, DHPE, MSW

This presentation provides practical, evidence-based skills to recognize and respond to mental health crises. Participants will learn to identify key signs and symptoms, apply de-escalation techniques, and build rapport using motivational interviewing and effective communication. Through real-world examples, attendees will gain the confidence to respond with clarity, compassion, and clinical insight.

Room 100

3:H Family Peers as Recovery Coaches

Cathy Callahan-Clem, CPC & Jody Schreven, CPC



A Peer who can work as a recovery coach for a COD client's family is an important asset for the recovery journey that is frequently overlooked. Although this is especially true when the person struggling with COD is a minor, it is true for spouses, siblings, and other family members. A Peer for the family as a whole is more than a sponsor, a mentor or an advocate. Indeed, they can be all three sometimes! The fact that adding this component works so well begins with the word "Peer" - in which there is an intrinsic sense of equity. This can relax family members whose loved ones are involved in COD treatment. Peers who have lived experience with COD in their own families are best equipped to walk alongside the folks identified by the client as their 'family'. This allows for the entire family to experience recovery for themselves and embrace a new way to live. When we provide education, resources and support unique to the family members, they are more likely to be able to sustain a recovery environment at home regardless of relapse(s) and support the COD treatment plan effectively - with understanding and without enabling. How we successfully support people to do this is something we are happy to share! We will also identify, for workshop participants, the community resources they can already engage. Such as the state, regional and local FYSPRTs and the WSCC - both started by grassroots family organizing - who have been seen at the forefront of providing this whole family healing families facing COD.

Workshop Four

October 6

Day Two | 9:30 - 10:45 AM



Room A

4:A System Transformation for Prenatal through Age 25 Behavioral Health Hanna Traphagan

Washington Thriving is the state's strategic plan for transforming the behavioral health system for the full continuum of care across the lifespan from before birth through age 25 including pregnant and parenting people, caregivers, families, and communities.

During this session, you will learn about how the development and implementation of the Washington Thriving Strategic Plan is human-centered and grounded in core values and principles aligned with a System of Care. This will include information on the efforts that are currently underway to advance the implementation of Washington Thriving across different layers of the system. You will learn about how this transformation involves your work and discover strategies and opportunities for engagement in advancing the implementation of Washington Thriving.



Room B

4:B The Double Journey: Staying in Recovery, Beating Burnout, and Surviving 30 Years in the SUD Field Eileen Mayfield, SUDP

How do you care for others in high-stress environments without losing yourself? In this deeply personal and experience backed presentation, veteran counselor Eileen Mayfield, SUDP, shares her 30-year journey navigating multiple levels of care, non-profit, and legal systems while maintaining continuous recovery. Eileen pulls back the curtain on the unique vulnerability healthcare providers face regarding professional burnout and relapse.



Room G1

4:C Lay of the Land: Encouraging Signs and Persistent Challenges Dot the Terrain of America's Evolving Drug Use Epidemic Kelly Olson, PhD

Although fentanyl's contribution to the overdose crisis has dominated the national conversation for over a decade, overdoses involving stimulants—alone and in combination with fentanyl— have increased and are gaining more attention. Because overdose data do not fully capture the scope of the illicit stimulant use in the U.S., the analysis of over 1.6 million clinical urine drug test (UDT) specimens collected from adults with a substance use disorder (SUD), discussed in this presentation, provides insight into the broader picture of illicit stimulant and fentanyl trends, particularly in the West, between 2016 and early 2026.

Participants will be able to better understand aspects of the drug use epidemic that are not fully captured by overdose data and highlight the underappreciated contribution of illicit stimulant use to the total burden of drug use among people who have a substance use disorder.

Room G2



4:D Navigating Co-Occurring Trauma, Autism, and/or ADHD From a Sensory Regulating Approach

Diane Knoll, OTD, OTR/L

For many Washingtonians, the journey toward stability is complicated by the overlapping intersection of Trauma, Autism, and/or ADHD. Traditional, talk-based mental health interventions often fall short when a client's underlying nervous system is chronically dysregulated by sensory overload, executive burnout, or a history of masking. This presentation introduces a neurodiversity-affirming, trauma-informed framework that prioritizes a sensory regulating approach. We will explore how chronic stress and trauma manifest physically through the sensory profiles of Autistic and ADHD individuals.

Room H/I



4:E Hope Starts at Home: Where Recovery Becomes a Family Journey

Amy Griesel, CPC

Recovery from substance use and co-occurring mental health challenges impacts more than the individual; it affects the entire family. Hope Starts at Home explores a family-centered approach to recovery that invites loved ones to learn, grow, and heal alongside the person in treatment. Through a peer and family lens, this workshop introduces practical ways to create parallel learning opportunities where families develop a shared understanding of recovery, healthy boundaries, communication, emotional regulation, trust, and relapse prevention. Participants will leave with practical, trauma-informed strategies for engaging families without blame, enabling, or taking ownership of another person's recovery. When families are given the tools to heal together, recovery becomes more than an individual journey. It becomes an opportunity for stronger relationships, deeper connection, and sustainable hope.

Room 300



4:F Journey Toward Building a Trauma-Informed, Person-Centered, High-Acuity SUD/COD Treatment Workforce for Marginalized and Justice-Involved Populations at the Medicaid or Homelessness Level

Peter Moote, MSW, SUDP, CCDS, CCTP

This presentation explores strategies for building a trauma-informed, person-centered workforce equipped to serve individuals with substance use and co-occurring disorders who are experiencing homelessness, Medicaid eligibility, or justice system involvement. Participants will examine evidence-based clinical competencies, integrated care principles, and workforce challenges while learning practical approaches to developing high-acuity treatment programs. The session will also highlight model program structures, collaborative treatment planning, and funding strategies to support sustainable, high-quality services for marginalized populations.

Room 200



4:G From Dopamine to Drug Laws: A Review of Neuroscience Research and Policies

Irene Hauzinger, PhD, SUDP

Substance use disorder treatment policies and attitudes are rapidly changing. Behavioral health providers may currently find themselves caught between opposing recommendations from the scientific community, reluctance to depart from past practices, changing government regulations, and paradigm shifts in how society views substance use disorder.

In times of change, it can be helpful to reflect on the past. To offer context and clarity, this panel will examine the pioneering neuroscientific research and drug policies of the previous century that have shaped the substance use treatment framework in practice today.

Room 100

4:H Building Better Crisis Care: From Vision to a Sustainable Rural Crisis Relief Center

Mindy Greenwood & Tessia Taylor, SUDP, MHP, LMHCA



Developing a successful Crisis Relief Center (CRC) requires more than opening a new behavioral health program—it requires building an integrated system of care. This presentation provides a practical roadmap for developing and implementing a rural Crisis Relief Center, from initial concept and planning through full operational readiness.

Attendees will gain insight into the key decisions involved in establishing a CRC, including community needs assessment, site selection, facility design, regulatory requirements, staffing models, operational workflows, and financial sustainability in a rural environment. Drawing on our organization's real-world experience, we will discuss the barriers encountered during development, the strategies used to overcome them, and the measurable benefits the Crisis Relief Center has brought to our community.

A significant focus will be placed on developing strong partnerships with healthcare providers, behavioral health agencies, hospitals, primary care practices, emergency departments, EMS, law enforcement, 988 crisis services, managed care organizations, and community organizations. We will discuss strategies for provider outreach and education, building referral pathways, increasing confidence in the Crisis Relief Center model, and creating a coordinated continuum of care that improves access while reducing unnecessary emergency department utilization and law enforcement involvement.

The presentation will also explore workforce planning, recruitment and retention in rural communities, operational and financial considerations, reimbursement strategies, and lessons learned in sustaining a Crisis Relief Center beyond implementation. Participants will learn how community education and stakeholder engagement are critical to increasing awareness, improving utilization, and building long-term support for crisis services.



American Behavioral Health Systems (ABHS) helps individuals take the next step toward recovery, stability, and healthier lives through compassionate, evidence-based behavioral health treatment.

We Offer

Residential Inpatient SUD/COD

Intensive Outpatient

Outpatient

Secure Withdrawal Management

Locations

Chehalis Residential IIP and SWMS

Cozza Residential IIP

Mission Residential IIP

Parkside Residential IIP, IOP and OP

Port Angeles Residential IIP, IOP and OP

Spokane IOP and OP

(866) 729-8038

Americanbehavioralhealth.net

Committee Members

Rose Hillcock, MSE **Committee Co-Chair** | Health Care Authority
Alexander Stoker, MA, LMHC **Committee Co-Chair** | Health Care Authority

Meghan DeGallier, MSW, LICSW | Health Care Authority
Nakia DeMiero, MPA, CPC | Health Care Authority
Stacey Devenney, MA, LMHC, SUDP, CMHS | University of Washington
Amy Dura, LMHC, SUDP, CMHS | Health Care Authority
Donnie Goodman, NCC/MA, LMHC | YMCA of Greater Seattle
Irene Hauzinger, PhD, SUDP | Health Care Authority
Judy Holman, LICSW, LMHC, SUDP
Amy Martin, MHC, SUDP | Thurston-Mason Behavioral Health Organization
Eric L. Osborne, MPA, SUDP | Health Care Authority
Kara M. Panek | Health Care Authority
Jennifer M. Ross, LMHC | Department of Health
Dakota Steel, CDE®, CPC, CRC | Health Care Authority
Roxane Waldron, MPA | Health Care Authority
Lora Weed, PhD, LMHC, MHP, CMHS, SUDP | Health Care Authority



TRIUMPH *You Are Invited!*

We are offering tours of our newly renovated
women's facility: **INSPIRATIONS!**

Saturday, October 3

1:00PM - 4:00PM

Sunday, October 4

1:00PM - 4:00PM

Tuesday, October 6

2:30PM - 4:30PM

3300 Roosevelt Ave, Yakima, WA 98902

5 minute drive from downtown Yakima



Inspirations

To RSVP & for more information:



(509) 853-4105



info@triumph.tx.org



triumph.tx.org/tours



or scan



UW PSYCHIATRY CONSULTATION LINE (PCL)



> FREE



Washington based
providers can consult on
mental health and/or
substance use care needs
for **adult patients (18+)**.

Common topics: **clarifying
diagnosis, medication
review, and treatment
planning.**

Available **24/7** for
prescribing providers and
8 am - 5 pm weekdays for
non-prescribers.

4 Simple Steps

Call 877-WA-PSYCH

Complete a brief intake

Consult with the UW psychiatrist

Receive written summary of
care recommendations



UW Medicine
UNIVERSITY of WASHINGTON
PSYCHIATRY CONSULTATION LINE

pcl.psychiatry.uw.edu

Thank You to Our Sponsors and Exhibitors!

Sponsors



Exhibitors

American Academy of Addiction Psychiatry

Crisis Connections: WA Recovery Helpline

Drugscan

Grand Canyon University

Hidden Springs Book Company

Key Works Recovery & Life Skills

Millennium Health

Northwest ATTC

Northwest Resources II, Inc.

Office of Behavioral Health Advocacy

Opioid Response Network

Oxford House Inc.

Recovery Services at The Daniel Clinic

SPARK Peer Learning Center

Washington Alliance for Quality Recovery Residences (WAQRR)

Washington State Community Connectors

Washington State Department of Veterans Affairs

Yakima Valley Farm Workers Clinic



ATTC Northwest

HHS REGION 10



Located at the University of Washington, the Northwest ATTC accelerates workforce adoption and implementation of useful treatment and recovery practices by:



Identifying workforce development needs among regional stakeholders



Disseminating helpful information and resources on useful practices



Sponsoring training online and in-person to enhance clinical knowledge and skills



Providing education and consultation to facilitate systems-level implementation

Learn more at attcnetwork.org/northwest

Turn Your Compassion Into a Career in Behavioral Health



LEARN ON-THE-JOB THROUGH AN APPRENTICESHIP

- ➔ Substance Use Disorder Professional (Traditional and Degree Program)
- ➔ Behavioral Health Technician
- ➔ Peer Support Specialist

Apprenticeships take place through the Health Care Apprenticeship Consortium. The Health Care Apprenticeship Consortium is sponsored by the Healthcare Training Fund.

CONNECT WITH US

healthcaretrainingfund.org

apprenticeship@healthcaretrainingfund.org

**Healthcare
TrainingFund**
FOUNDED BY SEIU 1199HW

**APPRENTICESHIP
COLLEGE of HEALTH**



Rebuild your life. Rediscover hope.

Personalized, evidence-based care for addiction and mental health challenges, with compassionate support for your next step.

Programs

-  Partial Hospitalization Program (PHP)
-  Intensive Outpatient Program (IOP)
-  Outpatient Services (OP)

Supporting services

-  Individual Therapy
-  Group Sessions
-  Family Counseling
-  Life Skills Training

You don't have to take the next step alone.

Start your recovery journey today.



509-385-4600



rebuilttreatment.com

Surrender. Commit. Rebuild.



Training & Development
Coaching & Consultation
Technical Assistance & Event Coordination

YOUR END-TO-END EVENT PARTNER

En Route Event Services specializes in delivering seamless, end-to-end event management solutions integrated with the Webex Events platform. From pre-event planning and venue management to post-event analysis, we ensure every detail is handled with precision so you can focus on creating an unforgettable experience for your attendees.

Strategic Planning



We lay the foundation.

Bi-weekly strategy meetings, custom workplans, and full marketing & branding support.

- **Tech Setup:** Website & Registration creation.
- **Speaker Management:** Travel, contracts, and reimbursements.

Flawless Execution



We take the lead.

On-site management, Webex mobile app communication, and vendor command.

- **Check-in:** On-site badge printing & material distribution.
- **Point of Contact:** We manage the hotel, catering, and security.

Actionable Insights



We prove your ROI.

Post-event data analysis, engagement metrics, and professional final reports.

- **Certification:** Automated Accredible digital credentials.
- **Financials:** Streamlined Stripe and QuickBooks reporting.

Ready to Elevate Your Next Event? Let's discuss your vision.

503-383-1069 | events@enroutenw.com

40th COD & Treatment

WASTATECONFERENCE

Washington State
Health Care Authority

 **en
route**
network