General Information

General program details are posted on our website at [http://www.neias.org](http://www.neias.org) under the “Best Practices” links. Please visit our website for pricing, partial scholarship applications, lodging options and reservation instructions, and online registration. After the course lists below, please refer to detailed course descriptions to help you make your course selections.

Courses

Courses have been organized in special focus areas that may be of interest to people who wish to focus on a certain content area during their time at the program. Participants may select courses from different tracks. Courses are offered in a 4-day, 3-day, 2-day, or 1-day format. Multi-day courses are noted in their description. Courses meet during the entire day or days indicated after the course number, so only one course may be taken per day. If you select a multiple day course, you must attend all days of that course.

M = Monday
T = Tuesday
W = Wednesday
Th = Thursday

Courses are an important part of the program. A previous participant noted:

“I thought the number of training opportunities was very helpful. I appreciated the number of different presentations I was able to attend and the variety of the trainings. It was really a lot of material presented in 4 days. Great value for the cost."

“I felt like I walked away with a lot of information.”

Course Offerings:

A variety of courses have been developed for clinicians, managers, clinical supervisors, those working toward becoming a manager or supervisor, criminal justice professionals, and people from related disciplines. Courses are designed to help professionals work on licensure or certification, specialty certifications, keep abreast of evidence-based practices, current clinical topics, emerging issues, and bring specific behavioral healthcare integration skills to their organization in the current environment.

The following pages include lists of courses by track and by day.

On the online course registration form, in addition to your first choice course selections, you are asked to make backup course selections for each day, as backup for the unlikely event of a course cancellation due to circumstances beyond our control.
2016 Best Practices School Courses (by Track)

Track 1: Clinical Strategies in Integrated Behavioral Health Treatment
- 1.M.T The Missing Peace: Men and Trauma (Monday – Tuesday)
- 1.W.Th Dialectical Behavior Therapy (DBT) Primer (Wednesday – Thursday)

Track 2: Enhancing Integrated Behavioral Health Treatment
- 2.M.T Sensitization and Kindling in Co-Occurring Disorders (Monday – Tuesday)
- 2.Th Mindfulness Based Stress Reduction for Co-Occurring Disorders (Thursday)

Track 3: Clinical Strategies in Substance Use Disorder Treatment
- 3.M Technology Assisted Care for the Treatment of Substance Use Disorders (Monday)
- 3.T Practical Counseling and Therapy “Gems” from Psychoanalytic Therapies (Tuesday)
- 3.W Practical Approaches to Treatment of Marijuana Use Disorders (Wednesday)
- 3.Th Recovery, Relationships, and Emotional Intimacy (Thursday)

Track 4: Addressing the Opioid Crisis
- 4.W Opioid Addiction and Treatment: Understanding the Disorder, Treatment, and Protocol (Wednesday)
- 4.Th Addressing the Opioid Crisis: Supporting Those on the Front Lines of an Epidemic (Thursday)

Track 5: Strategies in Client – Centered Care
- 5.M Retooling Treatment Practices for Longterm Wellness (Monday)
- 5.T Substance Use & Mental Health Problems Among Older Adults: The Challenge of Assessment, Intervention and Treatment (Tuesday)
- 5.W The DSM 5 for Addiction Clinicians (Wednesday)
- 5.Th Understanding and Using the Revised ASAM Criteria (Thursday)

Track 6: Maintaining Clinical Credentials for Today’s Professionals
- 6.M Professional Ethics for Substance Use Disorder Services - 2016 Updates for Clinical Supervisors in Public and Private Practices (Monday)
- 6.T Emerging Topics in Clinical Supervision: Technology Assisted Clinical Supervision (Tuesday)
- 6.W Advanced Ethics for Today’s Counselor (Wednesday)

Track 7: Strategies for Working with the Criminal Justice Involved Population
- 7.M New England ATTC Criminal Justice Workforce Development Advisory Committee (Monday)
- 7.T Cultivating Resiliency in Children with Criminal Justice Involved Parents (Tuesday)
- 7.W Trauma – Informed Care and Criminal Justice (Wednesday)
- 7.Th Drug Court as an Alternative to Incarceration (Thursday)

Track 8: Opportunities for Expanding Services
• 8.M.T Department of Transportation/Substance Abuse Professional Qualification or Requalification Training (Monday – Tuesday)
• 8.W Tobacco Cessation Skills for Clinicians (Wednesday)
• 8.Th Tobacco Cessation Programs – Skills for Administrators (Thursday)

Track 9: Operational Management Certification
• 9.M.T.W Effective Management and Fiscal Oversight (Monday – Tuesday – Wednesday)
• 9.Th Human Resource and Labor Laws (Thursday)

Track 10: Clinical Supervision Foundations
• 10.W.Th Clinical Supervision Foundations (Wednesday – Thursday and Pre-Event Online Course)

2016 Best Practices School Courses (by Day)

Monday:
• 1.M.T The Missing Peace: Men and Trauma (2-Day course on Monday – Tuesday)
• 2.M.T Sensitization and Kindling in Co-Occurring Disorders (2-Day course on Monday – Tuesday)
• 3.M Technology Assisted Care for the Treatment of Substance Use Disorders (Monday)
• 5.M Retooling Treatment Practices for Longterm Wellness (Monday)
• 6.M Ethics for Clinical Supervisors (Monday)
• 7.M ATTC Criminal Justice Workforce Development Advisory Committee (Monday)
• 8.M.T Department of Transportation/Substance Abuse Professional Qualification or Requalification Training (2-Day course on Monday – Tuesday)
• 9.M.T.W Effective Management and Fiscal Oversight (3-Day course on Monday – Tuesday – Wednesday)

Tuesday:
• 1.M.T The Missing Peace: Men and Trauma (2-Day course on Monday – Tuesday)
• 2.M.T Sensitization and Kindling in Co-Occurring Disorders (2-Day course on Monday – Tuesday)
• 3.T Practical Counseling and Therapy “Gems” from Psychoanalytic Therapies (Tuesday)
• 5.T Substance Use & Mental Health Problems Among Older Adults: The Challenge of Assessment, Intervention and Treatment (Tuesday)
• 6.T Emerging Topics in Clinical Supervision: Technology Assisted Clinical Supervision (Tuesday)
• 7.T Cultivating Resiliency in Children with Criminal Justice Involved Parents (Tuesday)
• 8.M.T Department of Transportation/Substance Abuse Professional Qualification or Requalification Training (2-Day course on Monday – Tuesday)
• 9.M.T.W Effective Management and Fiscal Oversight (3-Day course on Monday – Tuesday – Wednesday)

Wednesday:
• 1.W.Th Dialectical Behavior Therapy (DBT) Primer (2-Day course on Wednesday – Thursday)
• 3.W Practical Approaches to Treatment of Marijuana Use Disorders
• 4.W Opioid Addiction and Treatment: Understanding the Disorder, Treatment, and Protocol
• 5.W The DSM 5 for Addiction Clinicians
• 6.W Advanced Ethics for Today’s Counselor
• 7.W Trauma – Informed Care and Criminal Justice
• 8.W Tobacco Cessation Skills for Clinicians
• 9.M.T.W Effective Management and Fiscal Oversight (3-Day course on Monday – Tuesday – Wednesday)
• 10.W.Th Clinical Supervision Foundations (2-Day course on Wednesday – Thursday and Pre-Event Online Course)

Thursday:
• 1.W.Th Dialectical Behavior Therapy (DBT) Primer (2-Day course on Wednesday – Thursday)
• 2.Th Mindfulness Based Stress Reduction for Co-Occurring Disorders (Thursday)
• 3.Th Recovery, Relationships, and Emotional Intimacy (Thursday)
• 4.Th Addressing the Opioid Crisis: Supporting Those on the Front Lines of an Epidemic (Thursday)
• 5.Th Understanding and Using the Revised ASAM Criteria (Thursday)
• 7.Th Drug Court as an Alternative to Incarceration (Thursday)
• 8.Th Tobacco Cessation Programs –Skills for Administrators (Thursday)
• 9.Th Human Resource and Labor Laws (Thursday)
• 10.W.Th Clinical Supervision Foundations (2-Day course on Wednesday – Thursday and Pre-Event Online Course)

Course Descriptions

Track 1: Clinical Strategies in Integrated Behavioral Health Treatment

1.M.T The Missing Peace: Men and Trauma (Monday – Tuesday)

Research indicates that approximately 70% of people in addiction treatment programs are men and of these men over 60% report at least one traumatic experience in their life time. Traditional trauma informed addiction treatment models were originally designed for use with women and simply changing the pronouns does not respond to the unique experience and challenges of treating men’s trauma. With this in mind how many addiction professionals are being trained to effectively work with men and trauma? In addition, many addiction professionals may be unintentionally re-traumatizing male participants thereby increasing their risk of failure in the program. This presentation offers practical guidance and tools for addiction professionals working with men in navigating these challenging areas.

LEARNING OBJECTIVES:
Participants will be able to:
• Understand trauma as a defining and organizing experience that forms a recovering person’s sense of self and others;
• Describe the way that men experience, process, and exhibit trauma; and
• Utilize exercises and practices regarding what to do and what not to do in their work with men in addiction treatment programs.

TARGET AUDIENCE: Clinicians who work with men

THE PRESENTER: Chris Dorval MSW, LCWP, LCDCS, ICADC (RI) is a consultant for Griffin Recovery Enterprises specializing in treating males, trauma, and addiction. Chris has worked as a clinician and clinical supervisor in various levels of care in addiction treatment. Chris has extensive training in trauma informed care, treating co-occurring trauma and addiction, and is committed to helping others in their own personal journeys in recovery. A Licensed Chemical Dependency Professional
(LCDP), and a Licensed Chemical Dependency Clinical Supervisor (LCDCS), Chris graduated from Rhode Island College with a Bachelor’s degree in Psychology and his Master’s degree in Clinical Social Work. Chris is passionate about working with men affected by addiction and trauma and has dedicated his practice to this focus. As a father, husband, son, and friend Chris believes in developing healthy family and interpersonal relationships is essential to sustained recovery.

1.W. Th Dialectical Behavioral Therapy Primer (Wednesday – Thursday)
Dialectical Behavior Therapy (DBT) is a cognitive-behavioral treatment approach with two key characteristics: a behavioral, problem-solving focus blended with acceptance-based strategies, and an emphasis on mindfulness. DBT emphasizes balancing behavioral change, problem-solving, and emotional regulation with validation, mindfulness, and acceptance of clients. This training is meant to give participants knowledge of the origins and effectiveness of DBT, how to strategize treatment for clients with Borderline Personality Disorder, learn aspects of mindfulness, dialectics, and knowledge of some useful DBT skills. Examples of appropriate DBT services for both adolescents and adults will be discussed.

LEARNING OBJECTIVES: Participants will be able to:
• Describe the history, theory behind, and modern day uses of adherent, evidence based DBT;
• Review validation, dialectics, and basics of mindfulness, including didactic ways to teach mindfulness; and
• Utilize a variety of DBT skills within the emotional regulation, interpersonal effectiveness and distress tolerance modules, and be introduced to behavioral chain analysis.

TARGET AUDIENCE: Behavioral health clinicians who wish to familiarize themselves with the approach

THE PRESENTER: Christina Fay, LCSW, LADC, CCS works as the Clinical Coordinator for Spurwink Services. In her role, she works as a clinician, trainer, consultant, group leader, policy implementer and provides co-occurring prevention services in the community. She has worked in residential, day treatment, outpatient, integrated behavioral health and IOP settings. She received Intensive Training in Dialectical Behavioral Therapy through Behavioral Tech in 2011 and has trained more than 100 clinicians both inside and outside her agency in a “DBT Primer” course.

Track 2: Enhancing Integrated Behavioral Health Treatment

2.M. T Sensitization and Kindling in Co-Occurring Disorders (Monday - Tuesday)
Disorders like addiction, depression, OCD, and anxiety follow a developmental course from symptom to syndrome. As they progress they increasingly restrict one’s options. Cognitively, emotionally, and behaviorally the noose tightens until the disorder manifests itself as autonomous and automatic. This workshop will describe the neurological, brain center, and psychological changes in structure and function that take place in these and similar disorders. Treatment implications will be discussed.

LEARNING OBJECTIVES: Participants will be able to:
• List brain structures implicated in these disorders;
• Distinguish between symptom presentation and the actual disorder;
• Describe the process whereby individuals lose control of their feelings and behaviors;
• Describe the roles of sensitization and kindling in compulsion and loss of control;
• List three strategies to help clients loosen the grip of covered disorders; and
• Describe the actions of psychotropic medications and their value in treatment of these disorders.

THE PRESENTER: Nicolas Ruf, MA, LADC, has been conducting classes and workshops on addiction biology, co-occurring disorders, and psychopharmacology for more than twenty years. He has taught graduate courses in the subject(s) for Southern NH University, University of Southern Maine, University of Maine at Augusta, and Johnson State College, and conducted workshops from Hawaii to Alaska to the Caribbean. He has been Coordinator of DEEP’s Weekend Intervention Program for impaired drivers and taught the NEIAS Summer School faculty for many years.
2. Th Mindfulness – Based Stress Reduction and Co-Occurring Disorders (Thursday)
This training course will cover the details and skills in Mindfulness-Based Stress Reduction (MBSR), as well as limited exposure to MBCT (Mindfulness Cognitive Therapy) and MBRP (Mindfulness-Based Relapse Prevention). Since psychological stress, relapsing conditions, and depression come with addictions, the course tries to cover all three treatment areas. Participants will work within a tripartite model of lecturer-discussion, live demos and role plays, as well as in-depth discussion of experienced skills. The core of the course deals with MBSR in applications for clients with co-occurring disorders. Additional skills information and practice will include MBCT for depression and MBRP for addictions. By completing the entire course (including practice demos), participants should have the minimum necessary skills to bring these skills into their work with clients.

LEARNING OBJECTIVES: Participants will be able to:

- Use core components of MBSR in their case management, counseling and therapy;
- Describe aspects of Mindfulness-Based Cognitive Therapy (MBCT - more like CBT-M) and Mindfulness-Based Relapse Prevention skills (MBRP);
- Practice activities so participants can internalize new skills for use with their clients.

THE PRESENTER: Anthony R. Quintiliani, Ph.D., LADC has more than 38 years of work experience in community clinics and higher education. His community clinics work included 28 years as a Clinical Director; his higher education work included 35 years teaching clinical courses at The University of Vermont Graduate Counseling Program, Southern New Hampshire University Program in Community Mental Health, and Saint Michael's College. He has also published several articles and treatment manuals, and for 25 years has provided clinical workshops mainly in New England (south as far as Alexandria, VA. and west as far as San Diego, CA.). He has been the lead trainer in the Howard Center's Vermont Addictions Academy for 25 years. Dr. Quintiliani has also worked for many years as a State of Vermont Clinical Trainer and Consultant.

Track 3: Clinical Strategies in Substance Use Disorder Treatment

3. M Technology Assisted Care for the Treatment of Substance Use Disorders
Jaime Richardson (CT)
Attendees will be exposed to several technology assisted care products, along with technological infrastructure needs. There will be discussions about program cultures toward Technology-Assisted Care and how to work within those cultures. Participants will acquire information about efficient and fidelity-based interventions to improve outcomes for substance use disorder treatment.

LEARNING OBJECTIVES:
Participants will:

- Improve awareness of and receptivity to using Technology-Assisted Care (TAC) for the treatment of Substance-Use Disorders (SUDS);
- Identify effective TAC interventions for SUD;
- Demonstrate exemplary TAC interventions;
- Discuss strategies for adoption and integrating of TAC into routine clinical practice; and
- Explore implementation and integration challenges (e.g. costs, reimbursement, security, etc.).

TARGET AUDIENCE:
Clinicians

THE PRESENTER: Jaime Richardson is the Counselor Supervisor in the Addiction Services Unit of the Connecticut Department of Corrections.
3. T Practical Counseling and Therapy “Gems” from Psychoanalytic Therapies: Strategic Psychoanalytic and Psychodynamic Interventions in the Treatment of Addictions (Tuesday)

This intermediate level workshop will focus on psychoanalytic and psychodynamic interventions appropriate for addictions treatment. Depending upon time, five to eleven such interventions will be introduced and explained clinically. Winnicottian alliance building in intersubjective space will begin our journey. Themes of self-medication and trauma-induced addictions will be reviewed. Selected skills practice will involve role playing and process-discussion. Due to the nature of the content, it is NOT recommended that novice therapists participate in this workshop.

LEARNING OBJECTIVES:
Participants will:

• Review basic psychoanalytic and psychodynamic viewpoints of psychotherapy;
• Discuss and practice (a few) selected clinical interventions from psychoanalytic and psychodynamic foundations; and
• Utilize projection and projective identification in skilled psychotherapy practice.

Topics will include:

• Brief introductions to the specific clinical interventions;
• Therapeutic alliance, the relationship, earlier object-related experiences, and the common wish to be loved and cared for;
• Attachment and object/self-object synthesis in our lives and our problems;
• Balancing perceptions of self and others - distorted self-representations and corrective emotional experience;
• Transference, countertransference, projection, and projective identification;
• Safety and developmental insight in the therapeutic relationship - why insight is not enough; and
• Turning insight into corrective self-activated change - happiness and emotional balance.

THE PRESENTER: Anthony Quintiliani, Ph.D., LADC is a doctoral-level licensed clinical psychology, a licensed alcohol and drug abuse counselor, has over 35 years of clinical work experience in community clinics, schools, and graduate level higher education. He served as a clinical director at one of the New England’s largest community mental health centers. He is also considered a regional expert in co-occurring disorders and applications of mindfulness in treatment. He served for years as a lead trainer in Vermont’s mental health and substance abuse programs for integrated treatment.

3.W Practical Approaches to Treatment of Marijuana Use Disorders (Wednesday)

It is generally held that the treatment of marijuana use is more challenging than the treatment of other drugs. This workshop focuses on the issues of the treatment of marijuana use and disorders through the use of cognitive behavioral approaches. General strategic approaches that work will be reviewed along with the rationale for their use. Specific interventions that have been demonstrated to be effective will be covered as well as a review of the available research into treatment approach efficacy. Participants will leave the workshop with treatment approaches they can implement in their setting. Implications of medical marijuana and legalization will also be explored.

LEARNING OBJECTIVES:
After completing this workshop, participants will:
• Name two specific effective treatment approaches; and
• Describe one specific treatment approach that they can implement in their setting.

TARGET AUDIENCE:
Clinicians

THE PRESENTER: William L. Mock, Ph.D., LISW, LICDC, SAP is the Executive Director of the Center for Interpersonal Development, and Chief Trainer for the Ohio Institute for Addiction Studies in Lakewood, Ohio. He is the Principle Training Officer for Professional Training Center, a professional development service specializing in DOT drug and alcohol and Drug Free Workplace issues. His academic degrees include a Doctorate in Psychology and Masters in Social Work. He is a clinical member of the American Association of Marriage and Family Therapy, a licensepsds Clinical Psychologist, Licensed Independent Social Worker, Licensed Independent Chemical Dependency Counselor and DOT qualified SAP. He has expertise in chemical dependency treatment, family systems treatment and organizational systems development. He has provided training and consultation in several countries to such diverse groups as treatment/prevention providers, family therapists, industry leaders, educators, administrators, SAP's and criminal justice personnel.

3. Th Recovery, Relationships, and Emotional Intimacy (Thursday)

Our clients come to us with a wide ranging list of feelings dysfunctions. Among the most difficult of these is the inability to love and be loved. In terms of loving relationships, they report false starts, confusing endings, painful process, confusion about what this thing called love is, and how to "do it" to name a few. Many have not had good (or any) role models for how to love and be loved. Often times they come from a background and experience where relationships are exploitive or confused by other processes like addiction or other chronic illness. Most fall into the common trap of confusing the 3 L's; Love, Lust, and Limerence. Operational definitions of the 3 L's will be given as well as techniques for loving and being loved effectively.

LEARNING OBJECTIVES:
Participants will be able to:

• Operationally define Love, Lust and Limerence;
• Demonstrate three or more techniques for enhancing clients' ability to love and be loved;
• List the five feelings types; and
• Name a single strategy for improving their own experience with Love and Loving.

TARGET AUDIENCE: Clinicians

THE PRESENTER: William L. Mock, Ph.D., LISW, LICDC, SAP is the Executive Director of the Center for Interpersonal Development, and Chief Trainer for the Ohio Institute for Addiction Studies in Lakewood, Ohio. He is the Principle Training Officer for Professional Training Center, a professional development service specializing in DOT drug and alcohol and Drug Free Workplace issues. His academic degrees include a Doctorate in Psychology and Masters in Social Work. He is a clinical member of the American Association of Marriage and Family Therapy, a licensed Clinical Psychologist, Licensed Independent Social Worker, Licensed Independent Chemical Dependency Counselor and DOT qualified SAP. He has expertise in chemical dependency treatment, family systems treatment and organizational systems development. He has provided training and consultation in several countries to such diverse groups as treatment/prevention providers, family therapists, industry leaders, educators, administrators, SAP's and criminal justice personnel.

Track 4: Addressing the Opioid Crisis
4.W Opioid Addiction and Treatment: Understanding the Disorder, Treatment, and Protocol (Wednesday)

This course will provide an updated version of the NIDA and SAMHSA’s Blending Initiative product, originally entitled “Buprenorphine Treatment: A Training for Multidisciplinary Professionals”. The primary goal of this training package is to create awareness among addiction professionals about medications currently approved by the FDA and used in the treatment of opioid dependence. The course includes information about what to expect when someone is treated with medication, information about the legislation that permits office based buprenorphine treatment, the science of addiction, the mechanism of each medication, patient selection criteria and associated patient counseling and therapeutic issues.

OBJECTIVES: As a result of this training participants will:
Review the history of opioid treatment in the United States;

- Discuss changes in the laws regarding treatment of opioid addiction and the implications for the treatment system;
- Learn how medication will benefit the delivery of opioid treatment and the types of medications used to treat opioid use disorder; and
- Possess knowledge about the demographics of people affected by opioid use disorder.

THE PRESENTER: Michael Gaudet LICSW earned his undergraduate degree in 1981 at Bridgewater State College and his MSW from Rhode Island College in 1984. He is currently the Director of Quality Assurance for eleven outpatient mental health and substance abuse programs in Massachusetts, with a primary office at Arbour Counseling Services, Fall River, MA. In addition, he serves as the organization’s Compliance and Privacy Officer and is a surveyor for CARF International. Mike has extensive clinical and supervision experience in mental health and substance abuse treatment. He trains and consults across the country on clinical and professional growth topics, and, since 1986, is a faculty member of the New England Institute of Addiction Studies. He has been involved in several projects designed to advance the use of medication in substance abuse recovery, including the use of Methadone, Buprenorphine and Naltrexone, through the Addiction Technology Transfer Center of New England.

4.Th Addressing the Opioid Crisis: Supporting Those on the Front Lines of an Epidemic (Thursday)

Participants in this training will explore the impact of the recent opioid crisis on substance use disorder treatment professionals and others on the front line of the crisis. Participants will be given the opportunity to share how the crisis has affected them and how they have coped. Particular emphasis will be placed on identifying helpful coping strategies using group discussion and case reviews.

LEARNING OBJECTIVES: Participants will:

- Describe the scope of the overdose epidemic;
- Define secondary trauma;
- Describe symptoms of secondary trauma;
- Identify ways of coping with secondary trauma; and
- Identify strategies for developing resilience.

TARGET AUDIENCE: All Interested

THE PRESENTER: David Stanley, MSW, LCSW (MA) is a Trauma Integration Specialist for the Institute for Health and Recovery in Cambridge, Massachusetts. In his current position, he assists agencies providing a range of human and criminal justice services in enhancing their capacity to provide trauma-informed, integrated care. David has worked in various management and clinical positions for over twenty years and as a staff training specialist since 1995. He has developed, implemented, and coordinated staff training on a wide variety of topics related to mental health, trauma, and infectious disease. David received his Bachelor of Science in Human Services from Springfield College and a Master of Social Work degree from Washington University in Saint Louis. He is a licensed certified social worker in the state of Massachusetts.
As a trauma survivor, person living with HIV and member of the recovery community, David draws upon both his academic and personal experiences to enhance training delivery.

**Track 5: Strategies in Client – Centered Care**

### 5. M Retooling Treatment Practices for Longterm Wellness (Monday)

Research shows that recovery from substance use disorders comes in varying ways. The commonality in the recovery pathways is self-change. Epidemiological data clearly demonstrate that most people with SUDs initiate and sustain a wellness process without the help of specialized treatment or mutual aid. This course will analyze the role of specialized treatment in the recovery process for those who have difficulty initiating and sustaining behavioral change on their own. Understanding how professionals can support self-change will be examined.

**LEARNING OBJECTIVES:** Participants will:

- Understand the varieties of the recovery experience and the research behind “solo” recovery;
- Analyze the role of specialized treatment within the recovery experience; and
- Articulate how the clinical process can support self-change.

**TARGET AUDIENCE:** Counselors, licensed mental health professionals, social workers, recovery coaches, peer supporters, prevention specialists, and other social service professionals

**THE PRESENTER:** Stephen J. Gumbley MA, ACDP II (RI) has been working in human services for more than 30 years, specializing in substance abuse education, prevention and treatment since 1988. He is a master’s level, licensed clinician, and has served as clinical supervisor and program director in a variety of treatment settings. He recently retired after serving as the director of the Addiction Technology Transfer Center of New England at Brown University. Mr. Gumbley served on a CSAT national task force on Substance Abuse Treatment Issues for Sexual Minorities (Special Populations Workgroup); he has been a member of the Equity Action Advisory Council, the Rhode Island Foundation’s resource and funding development project for the LGBTQ community. A nationally-recognized trainer, Mr. Gumbley has taught at the regular and advanced schools of the New England Institute on Addiction Studies, the Addiction Technology Transfer Center of New England, and the Drug And Alcohol Treatment Association of Rhode Island, including courses on treatment issues for LGBT clients. He is an adjunct faculty member in the Chemical Dependency and Addiction Studies track at Rhode Island College and has taught at the Community College of Rhode Island. He has served as chair of the Board of Directors of Faces & Voices of Recovery, a national enterprise that organizes and mobilizes the recovery community.

### 5. T Substance Use & Mental Health Problems Among Older Adults: The Challenge of Assessment, Intervention and Treatment (Tuesday)

Older adults are admitted to acute care hospitals more for alcohol-related disorders than for heart attacks!!! This workshop will describe the challenges of assessment, intervention and treatment of older adults with substance use and co-occurring mental health problems. There will be discussion of six major problems areas encountered when working with older adults with substance-related disorders: (1) identification; (2) diagnosis; (3) assessment; (4) intervention; (5) referral; and (6) treatment. Appropriate responses to problems in each of the areas will be presented. A broad-based gerontological assessment process will be discussed with emphasis on co-occurring disorders. Older adult specific assessment instruments for depression, dementia and substance use disorders will be presented, including the newest screening instrument for problems with alcohol, prescribed and over-the-counter medications. As part of good mental health, the myths and realities of sexuality among older adults will be discussed.
LEARNING OBJECTIVES:
At the conclusion of the workshop participants will be able to:

- Identify 5 diagnostic problems with older adults;
- Identify 3 characteristics that discriminate between early- and late-onset alcoholics;
- Select the most appropriate screening instruments for substance use disorders and depression in older adults; and
- Identify the 3 factors most likely to motivate older alcoholics to change their behavior.

TARGET AUDIENCE:
All treatment providers

THE PRESENTER: Gerald D. Shulman, M.A., M.A.C., FACATA, has an over 40 year history of providing direct treatment services, providing clinical supervision, and administering treatment programs in single and multi-site systems in the not-for-profit and proprietary sectors. He is a licensed psychologist, a Master Addiction Counselor, a Fellow of the American College of Addiction Treatment Administrators and Board Certified by the American Academy of Psychologists Treating Addiction. He is an author of all three editions of the ASAM Patient Placement Criteria and provides extensive training and implementation consultation on the Criteria, co-occurring disorders, treatment planning and documentation, relapse prevention and evidenced-based practices. He was a workgroup facilitator for CSAT’s Tip #26, Substance Abuse among Older Adults. He is committed to helping treatment programs and systems provide persons with substance use disorders appropriate clinical services in efficient and cost-effective approaches.

5.W The DSM 5 for Addiction Clinicians (Wednesday)

This presentation will begin with the controversies surrounding the development of the DSM-5. It will go on to describe the diagnostic criteria for substance use disorders comparing the DSM-IV and the new DSM-5 and the implications for the old diagnoses of abuse and dependence. Emphasis will be placed on the new diagnostic category of Substance Use and Addictive Disorders and those mental health disorders most like to be found co-occurring with substance use disorders. A two-item screen for Gambling Disorders will be offered. A risk model for determining severity of addictive disorder keyed to the DSM-5 Substance Use Disorder Criteria and associated treatment interventions will be presented.

LEARNING OBJECTIVES: At the conclusion of the presentation, participants will be able to:

- Compare the diagnostic criteria for substance use disorders in the DSM-IV and DSM-5;
- Describe how the DSM-5 categories of Mild, Moderate and Severe compare to the DSM-IV categories of Abuse and Dependence;
- Understand the value of maintaining the DSM-IV Axis system for purposes of assessment, if not for diagnosis;
- Identify the 5 most common mental health disorders that co-occur with substance use disorders; and
- Explain why some people described as “alcoholics” can apparently return to non-problem drinking

TARGET AUDIENCE: Addiction clinicians

NOTE: This course may be especially useful in combination with the ASAM course on Thursday.

THE PRESENTER: Gerald D. Shulman, M.A., M.A.C., FACATA, has an over 40 year history of providing direct treatment services, providing clinical supervision, and administering treatment programs in single and multi-site systems in the not-for-profit and proprietary sectors. He is a licensed psychologist, a Master Addiction Counselor, a Fellow of the American College of Addiction Treatment Administrators and Board Certified by the American Academy of Psychologists Treating Addiction. He is an author of all three editions of the ASAM Patient Placement Criteria and provides extensive training and implementation consultation on the Criteria, co-occurring disorders, treatment planning and documentation, relapse prevention and evidenced-based practices. He was a workgroup facilitator for CSAT’s Tip #26, Substance Abuse among Older Adults. He is committed to helping treatment programs and systems provide persons with substance use disorders appropriate clinical services in efficient and cost-effective approaches.
5. Th Understanding and Using the Revised ASAM Criteria (Thursday)

This presentation will describe the 2013 changes in the revised ASAM criteria which include the rationale for change in the name of the criteria, linkage to the new DSM-5, changes in language to be more patient-centered and positive, changes in the numbering system, and the addition of four special populations for which application of the criteria has been difficult in the past (parents with children, people in safety-sensitive occupations, older adults and people in the criminal justice system). New sections on tobacco, gambling and managed care will be discussed.

**LEARNING OBJECTIVES:**
At the conclusion of the presentation, participants will be able to:

- Compare the continuum of substance use and gambling disorders;
- Perform an ASAM Criteria dimensional assessment for gambling disorders;
- Understand the links between smoking and relapse to other primary drugs addictions;
- Discuss the differences in assessment and treatment for at least one of the special populations; and
- Use the new Level of Care numbering system.

**TARGET AUDIENCE:** Addiction clinicians

**NOTE:** This course may be especially useful in combination with the DSM course on Wednesday.

**THE PRESENTER:** Gerald D. Shulman, M.A., M.A.C., FACATA, has an over 40 year history of providing direct treatment services, providing clinical supervision, and administering treatment programs in single and multi-site systems in the not-for-profit and proprietary sectors. He is a licensed psychologist, a Master Addiction Counselor, a Fellow of the American College of Addiction Treatment Administrators and Board Certified by the American Academy of Psychologists Treating Addiction. He is an author of all three editions of the ASAM Patient Placement Criteria and provides extensive training and implementation consultation on the Criteria, co-occurring disorders, treatment planning and documentation, relapse prevention and evidenced-based practices. He was a workgroup facilitator for CSAT’s Tip #26, Substance Abuse among Older Adults. He is committed to helping treatment programs and systems provide persons with substance use disorders appropriate clinical services in efficient and cost-effective approaches.

**Track 6: Maintaining Clinical Credentials for Today’s Professionals**

6.M Professional Ethics for Substance Use Disorder Services - 2016 Updates for Clinical Supervisors in Public and Private Practices (Monday)

This workshop will focus on specific areas of complication for clinical supervisors using the NAADAC Code of Ethics as revised. It will review (with lecture-discussion, role playing, and small group activities) the Code of Ethics with particular attention to areas commonly associated with supervisory complexities. Such areas include but are not limited to competence, boundaries, discrepancies in code requirement for supervisors, evidence-based treatments, and recovery perspectives. Special attention will focus on the realities involved in clinical supervision when the supervisor is/is not in their own recovery.

**LEARNING OBJECTIVES:**
Participants will:

- Review the Professional Code of Ethics for Alcohol and Drug Abuse Treatment;
- Engage in thought and emotion provoking realities about supervisory risks and survival requirements; and
- Experience small group activities dealing with personal, professional, and liability realities of HOW they NOW do clinical supervision.

Topics to be covered will include:
• The NAADAC Code of Ethics;
• Review of supervisory role in the Code;
• Learning activities related to challenges in supervision with emphasis on mind-body self-care practices;
• Cognitive, emotional and liability aspects of supervisory ethics - The triadic model of supervision and CABS-VAKGO-IS-RelS (Quintiliani’s system of human functioning);
• Anonymous case discussions about specific “problems” in supervision of helpers; and
• Evidence-based treatment, boundary challenges, self-help/AA/12 steps implications for bias in supervision.

THE PRESENTER: Anthony R. Quintiliani, Ph.D., LADC is a doctoral-level licensed clinical psychology, a licensed alcohol and drug abuse counselor, has over 35 years of clinical work experience in community clinics, schools, and graduate level higher education. He served as a clinical director at one of the New England's largest community mental health centers. He is also considered a regional expert in co-occurring disorders and applications of mindfulness in treatment. He served for years as a lead trainer in Vermont’s mental health and substance abuse programs for integrated treatment.

6.T Emerging Topics in Clinical Supervision: Technology Assisted Clinical Supervision (Tuesday)

As technology increases today, the ability to accomplish more with the same or less resources is possible. This class will enable participants to form strategies by which they increase their clinical reach in a more time efficient manner. Attendees will get the opportunity to participate in technology-based supervision while in this course.

LEARNING OBJECTIVES: Participants will be able to:
• Explain barriers to accessing quality supervision;
• Discuss benefits of using technology to extend the reach of clinical supervision;
• Identify ingredients needed to do effective technology-based supervision;
• Demonstrate how to use at least one type of technology for clinical supervision; and
• Develop strategies to overcome barriers to technology based supervision.

THE PRESENTER: John C. Gramuglia, MBA, LICSW, MLADC, LCS is Program Service Chief Clinical Specialist for the Vermont Department of Corrections. Mr. Gramuglia has spent the last 20+ years working specializing in both juvenile and adult offenders. Mr. Gramuglia has an MBA from Iona College and an MSW from Fordham University. He has earned advanced certification in Rational Emotive Behavioral Therapy (REBT) from the Albert Ellis Institute in New York City, studying directly with Dr. Ellis. Using the principles of SMART Recovery (Self Management and Recovery Training) he authored the SMART Recovery Teen Manual and facilitated the Inside Out SMART Recovery video for Inflexxion, developer of scientifically based programs designed to promote behavioral change. Mr. Gramuglia has extensive experience as an educator and trainer.

6.W Advanced Ethics for Today’s Counselor (Wednesday)

Whether you are a fresh-out-of-school counselor or a veteran supervisor, we are all faced with maintaining and upholding an ever-changing code of ethics. Some decisions are clear, some are kind of gray. This dynamic and engaging one-day training will push your buttons and test the limits of your ethical boundaries and awareness! Through didactic presentation, group participation, and the use of experiential activities, this training will enhance awareness of each attendee’s ethical responsibilities, mandates, and biases.

LEARNING OBJECTIVES: Participants will be able to:
• Review clinical implications of the decisions they make regarding the application of client confidentiality;
• Increase understanding of the different roles the counselor may play when dealing with the legal system;
• Identify and resolve complicated ethical conflicts that may arise in a counselor’s scope of practice; and
• Learn advanced, effective and ethical supervision practices.
TARGET AUDIENCE: Addiction Counselors, Program Managers, Clinical Supervisors

THE PRESENTER: Anthony R. Quintiliani, Ph.D., LADC is a doctoral-level licensed clinical psychology, a licensed alcohol and drug abuse counselor, has over 35 years of clinical work experience in community clinics, schools, and graduate level higher education. He served as a clinical director at one of the New England’s largest community mental health centers. He is also considered a regional expert in co-occurring disorders and applications of mindfulness in treatment. He served for years as a lead trainer in Vermont’s mental health and substance abuse programs for integrated treatment.

Track 7: Strategies for Working with the Criminal Justice Involved Population

7.M New England ATTC Criminal Justice Workforce Development Advisory Committee (Monday)

Members of the New England Addiction Technology Transfer Center’s Criminal Justice Advisory Committee will meet to discuss the training needs of the Criminal Justice/Substance Use Disorder Treatment workforce in the region. Facilitated needs assessment discussions will be used to inform the future training products developed and offered by the New England ATTC at Brown University. In addition, the successful implementation of two evidence-based strategies, Criminal Justice Treatment Planning (MATRS) and Promotional of Motivational Incentives (PAMI), in community criminal justice settings will be reviewed. Although this is a co-located meeting of the New England ATTC Criminal Justice Advisory Committee, Best Practices participants interested in this topic are welcome to attend the meeting from 10:00 am to 2:00 pm.

7.T Cultivating Resiliency in Children with Criminal Justice Involved Parents (Tuesday)

We can change the trajectory of children’s lives using their Adverse Childhood Experiences (ACE) score as a guideline for formulating strength-based and culturally-responsive interventions capable of fostering lifetime resiliency.

LEARNING OBJECTIVES: By the end of this training participants will be able to:

- Discuss current resiliency research as the other side of ACE;
- Define the Strengths and Resiliency Approach with concomitant elements;
- Learn how resiliency is calculated;
- Articulate why it is important for clinicians to understand and focus on resiliency; and
- Develop a strength-based and culturally-responsive service delivery plan.

TARGET AUDIENCE: Clinicians, prevention specialists, educators, criminal justice advocates, youth service directors, foster caregivers, family therapist, school social workers and public safety officers could benefit from this approach to culturally competence service delivery.

THE PRESENTER: Ida M. Terry, LADC has over 20 years of experience with the Connecticut Department of Correction, where she is currently responsible for the department’s statewide addiction assessments and DUI Home Confinement Programs. She also provides clinical supervision and training to correctional substance abuse counselors within correction and in the community. In 2007, her extensive criminal justice experience motivated her to establish the Annual Post Incarceration Chronicle of Success Conference for REACH Training and Consulting. In addition, Ida Terry has over 15 years of experience as an independent contracted youth services family therapist where she facilitates culturally responsive services. She is a nationally recognized trainer, whose presentations are enthusiastic and innovative.

7.W Trauma – Informed Care and Criminal Justice (Wednesday)

Many people who have behavioral health issues and are involved with the justice system have significant histories of trauma and exposure to personal and community violence. Involvement with the justice system can further exacerbate
trauma for these individuals. Traumatic events can include physical and sexual abuse, neglect, bullying, community-based violence, disaster, terrorism, and war. These experiences can:

- Challenge a person's capacity for recovery
- Pose significant barriers to accessing services
- Result in an increased risk of interacting with the criminal justice system

Trauma-informed care is an approach used to engage people with histories of trauma. It recognizes the presence of trauma symptoms and acknowledges the role that trauma can play in people's lives. Trauma-informed criminal justice responses can help to avoid re-traumatizing individuals. This increases safety for all, decreases the chance of an individual returning to criminal behavior, and supports the recovery of justice-involved women and men with serious mental illness. Partnerships across systems can also help link individuals to trauma-informed services and treatment.

**LEARNING OBJECTIVES:** Participants will:
- Increase understanding and awareness of the impact of trauma on the populations we serve;
- Increase knowledge around vicarious trauma that impacts the professional working with these populations;
- Develop trauma-informed responses appropriate in a criminal justice setting; and
- Provide strategies for developing and implementing trauma informed policies for the criminal justice involved population.

**TARGET AUDIENCE:** Criminal justice professionals and clinicians who serve clients involved in the criminal justice system

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**THE PRESENTER:** Heather Gagnon, MSW, LICSW, LADC is a Risk Reduction Coordinator for risk reducing programming for all incarcerated sexual offenders. Ms. Gagnon is currently responsible for administrative supervision and program supervision. Ms. Gagnon is responsible for insuring the fidelity of the Risk Reduction Program and coordinating with the Department of Corrections around the Risk Reduction Program. When needed Ms. Gagnon facilitates Rocking Horse groups with parenting women who struggle with substance abuse. Prior to becoming the Risk Reduction Coordinator overseeing sexual offender programming, Ms. Gagnon was the Risk Reduction Coordinator for the program in the North West Region of Vermont. Prior to her work as a Risk Reduction coordinator Ms. Gagnon was tasked with supervising her staff as well as providing independent and group therapy at the Chittenden Regional Correctional Facility with female offenders as well as being a substitute at Adult Crisis Services. Furthermore, while pursuing her Social Work degree Ms. Gagnon gained experience working with troubled youth and sexual offenders. Ms. Gagnon is a certified trainer with the ATTC and has implemented the ATTC model for the two years. Ms. Gagnon is also a certified trainer for How Being Trauma-Informed Improves Criminal Justice System Responses, Cognitive Behavioral Interventions with Substance abuse by the University of Cincinnati Corrections Institute and Criminal Conduct and Substance Abuse by Milkman and Wanberg. In addition to her being a certified trainer she has created a basic ethics training and a lecture on working with incarcerated women and addiction. Ms. Gagnon has a Master’s of Social Work from the University of Vermont.

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7. Th Drug Court as an Alternative to Incarceration (Thursday)

This course will provide an overview of the structure of a drug court and roles of team members, and will review the effectiveness of this model as an alternative to incarceration.

**TARGET AUDIENCE:** Criminal justice professionals, clinicians who serve clients involved in the criminal justice system, and all interested in learning more about this topic

**THE PRESENTER:** Robert Glasser
Track 8: Opportunities for Expanding Services

8.M.T Department of Transportation/Substance Abuse Professional Qualification or Requalification Training (Monday – Tuesday)

Co-Sponsored by the Professional Training Center, Inc.

A $50 additional course fee will be charged for this course to cover materials (manual, and CD with regulations and SAP guidelines) and consultation with the instructor (2 consultations every year for the next three years).

Effective January 1, 2004, professionals are prohibited from providing DOT substance abuse evaluations unless they have met the revised criteria outlined in the DOT regulations (49 CFR, Part 40, Subpart O, 40.281). The revised criteria requires the substance abuse professional to receive training in nine areas of study and to successfully complete an examination related to the training.

This course includes two days of training (12 CEU’s) related to the nine (9) domains of education required by the DOT regulations. It will be followed by the administration of the IC&RC written examination on the morning of the third day, or participants may schedule the examination at a different time during the Best Practices School. Participants who successfully complete the training and receive a passing score on the written IC&RC DOT /SAP examination will meet the revised DOT/SAP qualification criteria. (See Important Notes below.)

The two days of training will provide participants with a comprehensive understanding of the revised DOT alcohol and drug testing procedures and clearly define the role and responsibilities of the substance abuse professional. Participants will also receive two consultations with the instructor every year for the next three years. (See Important Notes below.)

LEARNING OBJECTIVES: Participants will learn:

• Background, rationale, and coverage of the DOT drug testing program;
• 49CFR part 40 and the 6 DOT agencies’ drug and alcohol testing rules;
• Key DOT drug testing requirements including collection, laboratory testing, MRO review, and problems in drug testing;
• Key DOT alcohol testing requirements including the testing process, the role of BATs and STTs, and problems in alcohol testing;
• SAP qualifications and prohibitions;
• The role of the SAP and the returning to duty process including the initial employee evaluation, referrals for education and/or treatment, follow-up evaluation, continuing treatment recommendations, and the follow-up drug and alcohol testing plan;
• SAP consultation/communication with employers, MROs, and treatment providers;
• Reporting and record keeping requirements;
• Legal and ethical issues that SAPs confront in carrying out their duties; and
• Referral resources for the SAP that meets all qualification criteria.

TARGET AUDIENCE: Participants who wish to qualify or re-qualify for the DOT Substance Abuse Professional

IMPORTANT NOTES:

• The two day training can be used as a refresher course for the individual who is already a qualified SAP as it meets the DOT/SAP re-qualification criteria for the 12 contact hours. This course may meet longer than the other Monday – Tuesday courses in order to meet for the required 12 contact hours.
Those wishing to take the IC & RC SAP exam on site: An exam fee of approximately $125 will be payable to The Professional Development Center directly to take the exam. The exam will be offered on the morning of the third program day, or participants may schedule to take the exam at a different time during the program if they will be taking other courses.

A $50 additional course fee will be charged for this course to cover materials (manual, and CD with regulations and SAP guidelines) and consultation with the instructor (2 consultations every year for the next three years).

THE PRESENTER: William L. Mock, Ph.D., LISW, LICDC, SAP is the Executive Director of the Center for Interpersonal Development, and Chief Trainer for the Ohio Institute for Addiction Studies in Lakewood, Ohio. He is the Principle Training Officer for Professional Training Center, a professional development service specializing in DOT drug and alcohol and Drug Free Workplace issues. His academic degrees include a Doctorate in Psychology and Masters in Social Work. He is a clinical member of the American Association of Marriage and Family Therapy, a licensed Clinical Psychologist, Licensed Independent Social Worker, Licensed Independent Chemical Dependency Counselor and DOT qualified SAP. He has expertise in chemical dependency treatment, family systems treatment and organizational systems development. He has provided training and consultation in several countries to such diverse groups as treatment/prevention providers, family therapists, industry leaders, educators, administrators, SAP’s and criminal justice personnel.

8.W Tobacco Cessation Skills for Clinicians (Wednesday)

Tobacco use is responsible for >480,000 preventable deaths annually in the United States and substance abuse/mental health patients demonstrate smoking prevalence at 3 to 4 times the rate (70%) of general population (17.8%). Tobacco Use Dependence is identified in the DSM-V. And yet, within addiction and mental health treatment settings tobacco use continues to be the norm (Zeidonis, 2007).

This course is designed to prepare and empower addiction and allied healthcare professionals to integrate evidence-based clinical tobacco cessation practice into existing preventions and treatment programs. The course covers the many aspects of tobacco-free chemical dependence services, including suggestions to implement systems changes.

LEARNING OBJECTIVES: Participants will:

- Explore current prevalence and trends of tobacco use as well as the barriers to change;
- Gain a more thorough knowledge of evidence-based clinical practices to treat tobacco use and dependence; and
- Prepare professionals who wish to take further coursework to pursue the level of Core Competency and Certification as a Tobacco Treatment Specialist through the U the UMass, School of Medicine, Center for Tobacco Treatment Research & Training.

TARGET AUDIENCE: Addiction treatment professionals, prevention professionals, other behavioral healthcare professionals, and allied healthcare professionals

THE PRESENTER: Linda E. Hurley, MA, CAGS, LCDCS, CCJP has been working in substance abuse treatment and behavioral healthcare for more than 20 years and has been with CODAC, Inc. since 1993. Ms. Hurley is a Licensed Chemical Dependency Supervisor and a Licensed Chemical Dependency Professional in the State of RI. Her certifications include Advanced Chemical Dependency Professional I and II, Chemical Dependency Supervisor and Certified Criminal Justice Professional. After serving as CODAC’s Director of Outpatient Services from 2004-2008, Ms. Hurley was promoted to the position of Chief Operating Officer and Director of Clinical Services in the summer of 2008 and continues to hold these titles through the present. In addition to her responsibilities at CODAC, Ms. Hurley teaches graduate and post-graduate level courses in clinical counseling at Salve Regina University; has presented at the national AATOD conference on topics ranging from successful approaches to collaboration to issues in methadone treatment for menopausal women; has taught classes at the RI Drug and Alcohol Treatment Association; and provides technical assistance to a number of agencies in the New England area, including the New England Addiction Technology Transfer Center (ATTC). Ms. Hurley has served on the boards of numerous social service organizations in RI; has been a mentor for the emerging leaders through an ATTC/NIDA New England Workforce Development initiative; and has been an active member of local and regional task forces and community councils. She has been a leader in supporting the coalition model of service delivery. Ms. Hurley has worked to bring systems wide change to CODAC, introducing new Evidence Based Practices and clinical modalities—most recently,
Motivational Interviewing and Contingency Management—that show positive results for substance abuse and behavioral healthcare treatment. Ms. Hurley also has a history of working to effect policy change in RI in order to improve systems development. She is currently the co-chair of the RI Pharmacotherapy Exchange Council, which was established as part of a RI Department of Corrections project to promote change in individual attitudes and departmental culture to optimize the use of medication assistance treatment in both corrections and community settings.

8. Th Tobacco Cessation Programs –Skills for Administrators (Thursday)

Tobacco use is responsible for >480,000 preventable deaths annually in the United States and substance abuse/mental health patients demonstrate smoking prevalence at 3 to 4 times the rate (70%) of general population (17.8%). Tobacco Use Dependence is identified in the DSM-V. And yet, within addiction and mental health treatment settings tobacco use continues to be the norm (Zeidonis, 2007).

This course can prepare and empower addiction and allied healthcare professionals to integrate evidence-based practice into existing prevention and treatment programs. The course covers the many aspects of tobacco-free chemical dependence services, including suggestions to implement systems changes, and an overview of the Core Competency and Certification as a Tobacco Treatment Specialist through the U the UMass, School of Medicine, Center for Tobacco Treatment Research & Training

LEARNING OBJECTIVES: Participants will:

- Explore current prevalence and trends of tobacco use as well as the barriers to change;
- Explore systems changes that could allow tobacco treatment to be more fully integrated into agency practice; and
- Prepare professionals who wish to have agency staff pursue the level of Core Competency and Certification as a Tobacco Treatment Specialist through the U the UMass, School of Medicine, Center for Tobacco Treatment Research & Training.

TARGET AUDIENCE: Addiction treatment professionals, prevention professionals, other behavioral healthcare professionals, and allied healthcare professionals

THE PRESENTERS: Linda E. Hurley, MA, CAGS, LCDCS, CCJP has been working in substance abuse treatment and behavioral healthcare for more than 20 years and has been with CODAC, Inc. since 1993. Ms. Hurley is a Licensed Chemical Dependency Supervisor and a Licensed Chemical Dependency Professional in the State of RI. Her certifications include Advanced Chemical Dependency Professional I and II, Chemical Dependency Supervisor and Certified Criminal Justice Professional. After serving as CODAC’s Director of Outpatient Services from 2004-2008, Ms. Hurley was promoted to the position of Chief Operating Officer and Director of Clinical Services in the summer of 2008 and continues to hold these titles through the present. In addition to her responsibilities at CODAC, Ms. Hurley teaches graduate and post-graduate level courses in clinical counseling at Salve Regina University; has presented at the national AATOD conference on topics ranging from successful approaches to collaboration to issues in methadone treatment for menopausal women; has taught classes at the RI Drug and Alcohol Treatment Association; and provides technical assistance to a number of agencies in the New England area, including the New England Addiction Technology Transfer Center (ATTC). Ms. Hurley has served on the boards of numerous social service organizations in RI; has been a mentor for the emerging leaders through an ATTC/NIDA New England Workforce Development initiative; and has been an active member of local and regional task forces and community councils. She has been a leader in supporting the coalition model of service delivery. Ms. Hurley has worked to bring systems wide change to CODAC, introducing new Evidence Based Practices and clinical modalities—most recently, Motivational Interviewing and Contingency Management—that show positive results for substance abuse and behavioral healthcare treatment. Ms. Hurley also has a history of working to effect policy change in RI in order to improve systems development. She is currently the co-chair of the RI Pharmacotherapy Exchange Council, which was established as part of a RI Department of Corrections project to promote change in individual attitudes and departmental culture to optimize the use of medication assistance treatment in both corrections and community settings.

Track 9: Certification in Operational Management: Addiction Field Concentration:
The Addiction Technology Transfer Center of New England and NEIAS will jointly offer the courses necessary to earn a Certificate in Operational Management: Addiction Field Concentration at the New England School of Addiction Studies and at the at the Best Practice School. Those wishing to earn the certification must attend all eight days of training. However, each course is open to interested attendees who may attend only the days that are relevant to their interests and earn appropriate continuing education credits.

The curriculum for the certification has been designed specifically to address the non-treatment aspects of running an agency or large program within a governmental agency, a private nonprofit or a business. Too often, strong clinicians don’t get the training and assistance they need to grow into effective chief operating officers. This certificate has been designed to meet that clear need within the field.

The certificate program consists of two parts that each includes four days of training.

For those who have begun completing part of the program and are planning when they will complete other parts of the program, the schedule for the next two years will be as follows:

2016:

Session A (June 6 – 9, 2016, Worcester, MA):
- Marketing Addiction Treatment, Prevention and Recovery Programs
- Developing Leaders within Your Organization
- Strategic Planning and Project Oversight
- Increasing Revenue? Is the focus dollars and cents or dollars and sense?

Session B (August 29 – September 1, 2016, Waterville Valley, NH):
- Effective Human Services Management
- Fiscal Management and Financial Oversight
- Human Resource and Labor Laws

2017:

Due to participant requests, during 2017, each site will host a different session than it has previously held:

Session B (June 5 – 8, 2017, Worcester, MA):
- Effective Human Services Management
- Fiscal Management and Financial Oversight
- Human Resource and Labor Laws

Session A (Expected: August 2017, Waterville Valley, NH):
- Marketing Addiction Treatment, Prevention and Recovery Programs
- Developing Leaders within Your Organization
- Strategic Planning and Project Oversight
- Increasing Revenue? Is the focus dollars and cents or dollars and sense?

Target Audience:
This program is intended for those in the substance use disorder treatment, prevention, recovery and related professions who are tasked with the responsibility of effectively managing the functions of a department, program, or agency (or who aspire to such a role).
Track 9: Certification in Operational Management: Addiction Field Concentration:


Effective General Management: First 1.5 days

This course will examine what research has taught society about effective management approaches, including using appropriated management styles for working with individuals and groups; situational leadership and conflict management; communication and listening skills; and the role and importance of organizational behavior.

The course will emphasize management skills development through professional exploration and focused skill development. An assessment of the numerous skills that are necessary to be an effective manager will help participants to evaluate strengths and challenging areas.

During this session, beginning participants intending to earn the Certification in Operational Management within the Addiction Field will develop two management learning goals that will guide their contribution in the program.

THE PRESENTER: Peter Smith, MBA is an organizational consultant with over 24 years of experience working with senior managers, management teams, work groups, and individuals in organizational and team effectiveness, conflict management, work redesign, strategic planning and management, and coaching. His clients include over 80 organizations from a range of sectors including: health care, human services, engineering, energy services, and high technology. He was a faculty member with the Department of Organization & Management at Antioch University New England, where he taught courses in organization development and change leadership, work redesign, systems, group development, organizational strategy, and leadership for 20 years. Peter also developed and delivered the New England Leadership Institute for Substance Abuse Professionals for several years.

Fiscal Management and Financial Oversight: Second 1.5 days

Managers in human service agencies are often trained as addiction counselors, social workers, and professional counselors, or have public administration degrees. While such backgrounds are necessary to understand the target audience and mission of the agency, these backgrounds do not necessarily address the skills necessary to oversee the critical fiscal aspects of a small business. This session is designed to build a concrete understanding of the following:

LEARNING OBJECTIVES: The following information will be discussed:

- Accounting systems;
- Function of auditing/need for internal controls;
- Sharing fiscal information with board and staff;
- Role of budgeting as a planning and control tool;
- Introduction to use of financial tools to include managing collections and other relevant reporting information; and
- Identification of appropriate financial indicators of performance.

THE PRESENTER: Tim Floyd is currently the Director of Finance for Crisis and Counseling Centers, Inc., in Augusta, ME, a medium size nonprofit organization which provides mobile crisis, outpatient mental health and substance abuse treatment, and medication management services to the central Maine and midcoast area. He formerly worked as a senior accountant with MacPageLLC, one of Maine’s largest public accounting firms, specializing in non-profit auditing, consulting and Quickbooks support. He is a certified QuickBooks advisor and has presented QuickBooks trainings for the Maine Association for Nonprofits for the past several years.
This course will include Human Resource best practices for staff recruiting, retention, and development. Topics include general Human Resource law and practices (some which will vary depending on the state and other factors), employee performance evaluation essentials, role and provision of employee training, and elements of an effective pay for performance system.

LEARNING OBJECTIVES: Participants will be able to:

• Identify two strategies for staff recruitment and retention; and
• Describe three important Human Resource practices.

THE PRESENTER: Michelle Gray, President of HR Synergy, LLC holds over 20 years of experience in the field of human resource management in various industries, including biotechnology, construction, real estate investment, property management, engineering, information technology, manufacturing, and healthcare. As a Human Resource Generalist, Michelle has experience in all areas of HR to include coaching and consulting for senior management, policy development and implementation, benefits management and administration, compensation structure development, recruiting and retention, performance management, employee relations, training and development as well as management of worker’s compensation. Michelle has worked with businesses varying in size from 1-1500 employees, and businesses with one location or multiple locations in different states. Recently, she developed and implemented HR policies for a rapidly growing multi-company organization and assisted management with resolving employee relations issues, determining staffing needs, implementation of a 360 degree performance evaluation program, management of benefit plan offerings for all entities, as well as overseeing employee development. Michelle is an active member of Society for Human Resource Management (SHRM), Manchester Human Resource Association (MAHRA), Manchester Chamber of Commerce, NH Center for Non-Profits and Greater Manchester/Nashua Home Builders and Remodelers Association.

Track 10: Clinical Supervision Foundations

10. W. Th. Clinical Supervision Foundations (Wednesday - Thursday on site; with pre-event online course and post-event online activity meets 30 hours)
This course consists of two interconnected components: an online course and a face-to-face training, and is intended for supervisors in substance use disorder (SUD) treatment and recovery settings. The course totals 30 contact hours and introduces clinical supervisors, along with persons preparing to become supervisors, to the knowledge and skills essential to the practice of supervision.

Prior to the Best Practices School, participants of the Clinical Supervision Foundations course will first complete an online ATTC course for 14 contact hours. The online course will introduce individuals to theories, definitions, roles, issues and practices germane to developing supervisory skills. Upon completion of the online course, participants will acquire fundamental clinical supervision knowledge and basic skills at their own pace.

The second part of the Clinical Supervision Foundations course is a 14 hour face-to-face training on site at the Best Practices School and a two hour worksite assignment (16 contact hours in total).

IMPORTANT NOTES ABOUT ONLINE PORTIONS OF COURSE:
The 14-hour pre-event online course MUST be completed by August 22, 2016. Participants acquire fundamental clinical supervision knowledge and basic skills at their own pace. The second part of the Clinical Supervision Foundations course is a 14 hour face-to-face training on site at the Best Practices School and a two hour worksite assignment (16 contact hours in total).

A two-hour online follow up course will also be required after the program. Course participants will be expected to join a Webex based learning collaborative for a period of six months following this event. The learning collaborative will consist of a 1 hour monthly Webex on-line meeting. In addition, participants will be provided with on-line consultation with the Trainers and Technology Transfer Specialists for the six month period to address implementation issues.
TARGET AUDIENCE: The Clinical Supervision Foundations course is especially suited for: Beginning clinical supervisors; Clinical Supervisors who would like to enhance or review the fundamental skills needed to be a successful clinical supervisor; Counselors who are being groomed to become clinical supervisors; and Behavioral healthcare professionals who want to learn more about clinical supervision.

THE PRESENTERS:

Maggie Hooker serves as an Addiction Therapist, Veteran’s Administration, White River Junction, Vermont.

John C. Gramuglia, MBA, LICSW, MLADC, LCS is Program Service Chief Clinical Specialist for the Vermont Department of Corrections. Mr. Gramuglia has spent the last 20+ years working specializing in both juvenile and adult offenders. Mr. Gramuglia has an MBA from Iona College and an MSW from Fordham University. He has earned advanced certification in Rational Emotive Behavioral Therapy (REBT) from the Albert Ellis Institute in New York City, studying directly with Dr. Ellis. Using the principles of SMART Recovery (Self Management and Recovery Training) he authored the SMART Recovery Teen Manual and facilitated the Inside Out SMART Recovery video for Inflexxion, developer of scientifically based programs designed to promote behavioral change. Mr. Gramuglia has extensive experience as an educator and trainer.