

26th Annual

Crisis Intervention Conference

Hybrid Conference (virtual and in-person events)



Prisms of Possibility Crisis and Recovery

Who Should Attend:

Consumers and family members, administrators, front-line workers and community professionals involved in crisis intervention from the following areas:

- Court Personnel
- Law Enforcement
- School Administrators
- Emergency Services Personnel
- Mental Health Professionals
- Social Workers
- Hospital Professionals
- Substance Abuse Professionals
- Jail Personnel



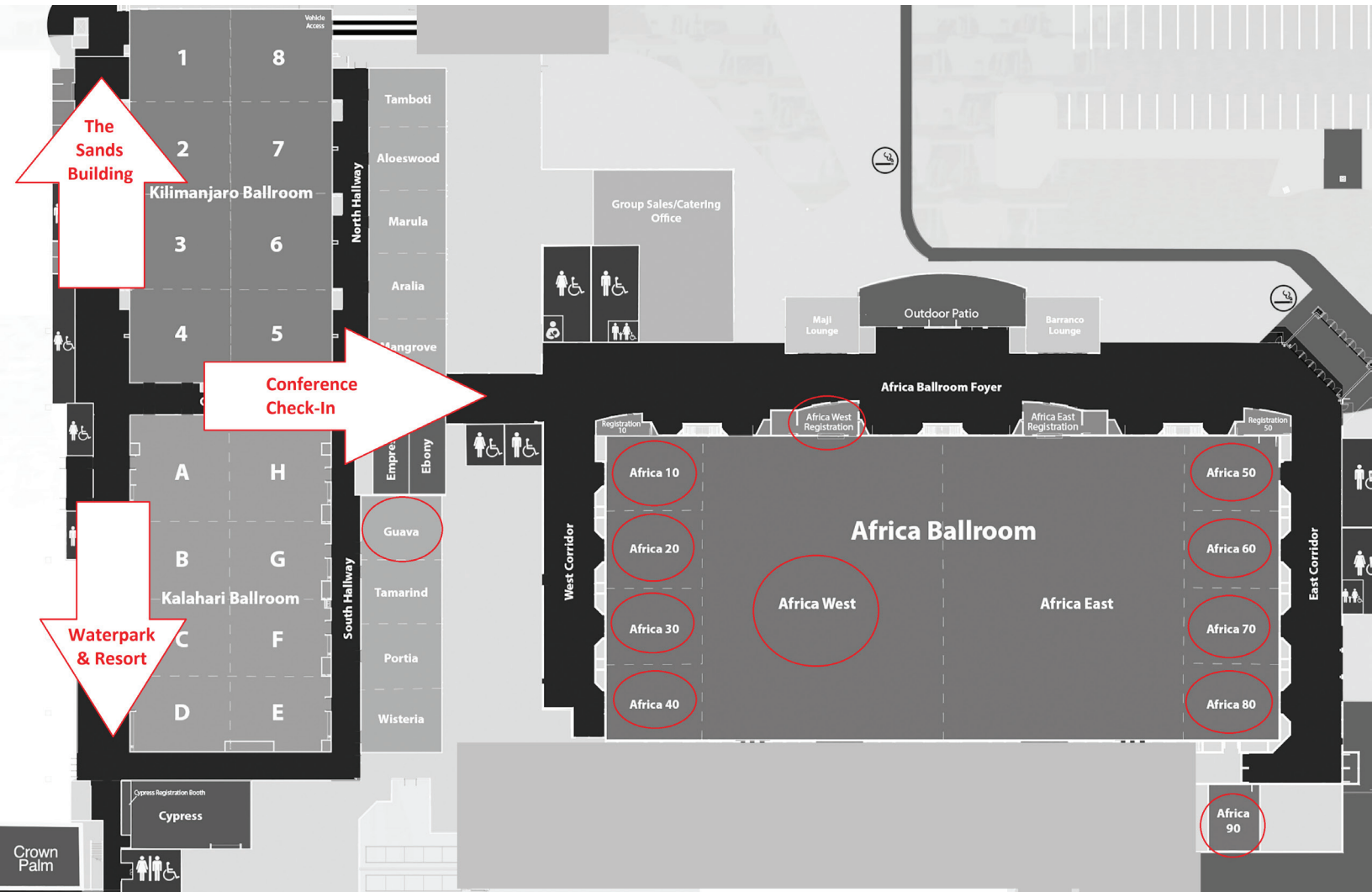
Continuing Education and Outreach
University of Wisconsin-Stevens Point

September 15-16, 2022

Kalahari Resort and Convention Center, Wisconsin Dells, WI

Conference Map

1305 Kalahari Drive, Wisconsin Dells, WI 53965
1-877-KALAHARI (525-2427)



**Conference Check-In
will be in the Africa Foyer**

Mother's Room

The Kalahari has a dedicated Mother's Room located in the Africa Foyer. Ask at the registration desk if you have additional questions.

Rooms that will be used

- Africa 10
- Africa 20
- Africa 30
- Africa 40
- Africa 50
- Africa 60
- Africa 70
- Africa 80
- Africa 90
- Africa West
- Guava

Agenda-at-a-Glance

Thursday • September 15, 2022

7 a.m. – 8 a.m.

Check-In and Breakfast
Africa West

8 a.m. – 8:30 a.m.

Welcome
Africa West
Karen Timberlake
DHS Secretary

8:30 a.m. – 9:45 a.m.

Opening Keynote
Africa West
Caroline Mazel Carlton
Director of Training, Wildflower Alliance

10 a.m. – 12:00 p.m.

Morning Breakout Sessions

1. How to Recognize and Respond to Common Ethical Dilemmas in Crisis Work – Part 1 of 2 - Africa 10
2. “Alternatives to Suicide” Approach in Practice: Validation, Curiosity, Vulnerability and Community (VCVC) Africa 80
3. Community Alternative Response Emergency Services (CARES): An Alternative to Traditional 911 Emergency Response to Behavioral Health Crises Africa 30
4. The Continuum of Peer Support in Clinical and Crisis Systems of Care - Africa 40
5. Suicide, Cancer, and Managing Relationships - Guava
6. Crisis 101 - Africa 60
7. Residential Crisis Stabilization Panel Africa 20
8. The Art & Science of Multiculturally Responsive Suicide Prevention: Best Practices for MH Clinicians - Part 1 Africa 70
9. Integrating Self and Systems to Effect Transformation: It Begins with Individual Recovery Paradigms - Africa 50

12:00 p.m. – 1:00p.m.

Lunch
Africa West

1:00 p.m. – 2:00 p.m.

Afternoon Keynote
Africa West
Myra McNair
Executive Director, Anesis Center for Therapy

2:30 p.m. – 4:30 p.m.

Afternoon Breakout Sessions

10. How to Recognize and Respond to Common Ethical Dilemmas in Crisis Work – Part 2 of 2 - Africa 10
11. Connecting Using Motivational Interviewing - Africa 60
12. Language Challenges in Mental Health and Substance Use - Africa 50

Thursday • September 15, 2022

2:30 p.m. – 4:30 p.m.

Afternoon Breakout Sessions (Continued)

13. Mobile Crisis Teaming Panel - Africa 40
14. Suicide Among Older Adults - Africa 80
15. Burnout, Compassion Fatigue, and Self-Care - Africa 30
16. The Prism Program’s First Year: Lessons Learned in LGBTQ+ Peer Support - Guava
17. The Art & Science of Multiculturally Responsive Suicide Prevention: Best Practices for MH Clinicians - Part 2 Africa 70
18. How Can We Be the Most Helpful: Practical Strategies for Critical Engagement - Africa 20

4:30 p.m. – 6:00 p.m.

Reception
Africa West

7:00 p.m. – 8:00 p.m.

Evening Yoga
Africa 90

Friday • September 16, 2022

6:00 a.m. – 6:45 a.m.

Morning Yoga
Africa West

7:30 a.m. – 8:30 a.m.

Check-In and Breakfast
Africa West

8:30 a.m. – 10:30 a.m.

Morning Breakout Sessions

19. Hmong Mental Health - Africa 50
20. Applying Multicultural Competencies in Cross-Cultural Supervision - Africa 20
21. Chapters 51 & 55: A Legal Perspective from Both Sides of the Courtroom Africa 30
22. Pocket Wellness Recovery Action Plan: A Blueprint for prevention of Crisis Recidivism - Africa 10
23. Engagement and Empathy in the Era of the Open Note - Africa 70
24. Co-Responder Models with Police Africa 40
25. 988 - Africa 80
26. Hearts in Minds: Why Love Will Save the Behavioral Health Crisis System Africa 60
27. Keynote Breakout Session TBA - Guava

11:00 a.m. – 12:15 p.m.

Closing and Keynote
Africa West
Santina Muha
Speaker, Writer, Actor, Storyteller, and Host

Get *Whova* for Wisconsin Crisis Intervention Conference

Official Event App

- Explore the **professional profiles** of event speakers and attendees
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Crisis2022

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Conference Information

Handouts

Handouts are posted as links in the session descriptions within Whova. Please note that not all presenters have handouts to share with conference attendees.

Conference Evaluations

A link to evaluate the conference will be posted on Whova on Friday, September 16, 2022. This link will also be emailed to all participants.

Win FREE Registration to the 2023 Conference!

Suggest a theme for the 2023 Crisis Intervention Conference! If your suggestion is chosen, you will receive complimentary registration to the 2023 conference. Submissions are due by Noon on Friday, September 16, 2022. Links will be available in Whova and will be sent to you via email.

2023 Call for Proposals

Information on submitting a workshop proposal for the 2023 conference is posted on the Crisis Intervention Conference website. Information will also be emailed to all participants.

2023 Save the Date

27th Annual Crisis Intervention Conference

Thursday-Friday, September 21-22, 2023

Kalahari Resort and Convention Center

Wisconsin Dells, Wis.

Name Tags

Please have your nametag visible for admittance into your sessions and meals. The breakout sessions you registered to attend are printed on the back of your name badge; however, CEHs are earned in the sessions you attend during the conference. Please attend the sessions that best meet your needs.

Dietary Needs

If you indicated dietary need at registration, it is indicated on the back of your name badge. Simply show the backside of your name badge to Kalahari catering staff and they will be able to assist you.

UWSP Continuing Education works hard to communicate all special meal requests and allergies to the conference venue. Unfortunately, due to circumstances beyond our control, we cannot guarantee all special dietary needs can be met. If you have dietary needs (i.e., low salt, low carb, keto, dairy-free, etc.), you may wish to make alternative meal arrangements.

Thursday • September 15, 2022
Day 1

Conference Check-In
and Breakfast - Africa Foyer
7 – 8 a.m.

Opening | Africa West
8 – 8:30 a.m.

Karen Timberlake - DHS Secretary

Morning Keynote
8:30 – 9:45 a.m.

The “Alternatives to Suicide” Approach to Crisis: Imagination, Common Sense, and Reducing Harm

Africa West

Many of us have devoted our lives to the shared goal of reducing the loss of our community members to suicide. We have felt the grief when protocols designed to predict, diagnose or control behavior have continually failed to achieve the life-sustaining communities that we dream about. We have witnessed in frustration the steadily rising suicide rates despite huge financial investments in suicide prevention efforts. There is now an international movement building to re-envision the tools and intentions we bring to dialogue about suicide. Join Caroline Mazel-Carlton as she shares how her experiences as a psychiatric patient and as peer support specialist in the public and private mental health sector have informed her work with developing the “Alternatives to Suicide” approach.

Objectives

1. Participants will be introduced to the three key paradigm shifts of the “Alternatives to Suicide” approach and empirical data that support these shifts.
2. Participants will be able to identify at least two ways that the lived wisdom of suicidal people can be introduced to responses to crisis.
3. Participants will be introduced to at least one tool to re-frame conversations around risk in a way that better acknowledges the root causes of suicide.

Caroline Mazel-Carlton - Director of Training, Western Massachusetts Recovery Learning Community, Director of Training, Wildflower Alliance, Holyoke, Mass..

Break
9:45 – 10 a.m.

Workshop
Breakout Sessions 1-9
10:00 a.m. – 12:00 p.m.

1) How to Recognize and Respond to Common Ethical Dilemmas in Crisis Work – Part 1 of 2

Africa 10

How to recognize and respond to common ethical dilemmas in our clinical work. This workshop will present a framework that will help address those ethical issues that we all face day-to-day in our clinical work. When should we do what our clients want, and when is it justified to follow our own judgment? What rights does the family have, and how do we resolve conflicts when the family and client disagree? When is it justified to breach confidentiality? What are the pros and cons of engaging in involuntary/coercive treatment? What can you, as a crisis worker, do to handle the conflicting emotions that often emerge on such cases? The workshop will not provide answers, but will provide a way of thinking through these and other common dilemmas.

Objectives

1. Participants will gain a better understanding of the justification for and limits of our paternalism or “clinical authority.”
2. Participants will gain a fuller understanding of why boundaries are important, and how they can be used for safety of both clinician and client.
3. Participants will learn how issues of confidentiality can be balanced with other needs in a crisis situation.
4. Participants will be able to process the different conflicting ethical principles inherent in involuntary treatment.
5. Participants will be able to engage in coping mechanisms and self care tied to the ongoing introspection of complex ethical issues in crisis care..

Nancy Pierce - *Advanced Clinical Practitioner, MS, LCSW, Mental Health Crisis Consultants, Mt. Horeb, Wis.*

Tony Thrasher - *D.O., DFAPA Medical Director of Crisis Services, Milwaukee County Behavioral Health Division, Milwaukee, Wis.*

2) “Alternatives to Suicide” Approach in Practice: Validation, Curiosity, Vulnerability and Community (VCVC)

Africa 80

Since 2009, folks with lived experience of psychiatric treatment for suicide in Western Massachusetts have partnered with the harm reduction and social justice communities to develop new supports. These efforts began with “Alternatives to Suicide” groups co-facilitated by individuals with lived experience of navigating suicidal thoughts or attempts. In these settings,

2) Continued

participants could voice and explore thoughts of suicide in an environment where clinical risk assessments, pathologizing language, “liability” focus and non-consensual treatment protocols were intentionally absent. As these dialogues occurred, new ways to respond and support naturally developed in the space created by letting go of conventional paradigms. The resulting VCVC model (Validation-Curiosity-Vulnerability-Community) is now utilized in diverse environments throughout the world by individuals in various roles. The “Alternatives to Suicide” approach is welcomed as a return to what human beings are good at: deep listening, making meaning, and connecting through sharing their stories. This approach can be utilized by individuals who do not identify with having thoughts of suicide.

Objectives

1. Participants will be familiarized with the four components of the VCVC model and the goals of each.
2. Participants will observe and de-brief two role-plays to better define what VCVC does and does not look like in practice.
3. Participants will identify at least three open-ended questions to ask someone who is suicidal to create better understanding and connection..

Caroline Mazel-Carlton - *Director of Training, Western Massachusetts Recovery Learning Community, Director of Training, Wildflower Alliance, Holyoke, Mass.*

3) Community Alternative Response Emergency Services (CARES): An Alternative to Traditional 911 Emergency Response to Behavioral Health Crises

Africa 30

The city of Madison has joined many other communities across the country in recognizing the over-reliance on law enforcement as the primary first responders to behavioral health crises, and has developed a new initiative to expand the continuum of emergency responses. After months of careful planning, CARES launched on September 1, 2021, and the popular program has already significantly expanded its capacity. In this session you will learn more about the creation and operation of CARES.

Objectives

1. Participants will explore why an alternative to law enforcement is needed to respond to behavioral health crises.
2. Participants will learn how community input and police data were used to inform program development.
3. Participants will understand the mission and goals of the CARES team, and critical operational features.
4. Participants will identify the value of key stakeholders and community partnerships for a successful program.
5. Review data from the first year of CARES service.

Sarah Henrickson - *LCSW, Clinical Team Manager, Emergency Services Unity, Journey Mental Health Center, Madison, Wis.*

Ché Stedman - *MS, Assistant Chief of Medical Affairs, Madison Fire Department, Madison, Wis.*

4) The Continuum of Peer Support in Clinical and Crisis Systems of Care

Africa 40

Recognizing the value of the perspective of lived experience when it comes to mental health and substance use, Waukesha County in partnership with NAMI Southeast Wisconsin has made great efforts to expand peer support through its clinical services array in the past few years. This presentation will provide an overview of how Waukesha County has incorporated peer support into education and suicide prevention efforts in schools and in the community, how youth who have had contact with the Crisis team may be connected to Youth Outreach Specialist for peer support, and how outpatient clinical services has integrated peer support into its recovery efforts and innovative case management models. Two certified peer specialists will lead the conversation and give examples of impactful connections they have made with people who have had contact with Clinical and/or Crisis systems of care. The presentation will also touch on the logistics of peer support integration into a human services organization.

Objectives

1. Participants will learn how peer support is utilized for education and suicide prevention efforts for youth in Waukesha County.
2. Participants will understand how peer support services are incorporated into Waukesha County systems of care.
3. Participants will hear three examples of how peers have engaged people in their paths of recovery.

Jenny Wrucke - LMFT, Health & Human Services Coordinator, Crisis Intervention & Chapter 51 Court Services, Waukesha County DHHS Clinical Services Division, Waukesha, Wis.

Lexi Sandoval - Certified Peer Specialist, Youth Outreach Specialist, NAMI Southeast Wisconsin

Charlie Hart Sheehan - CPS, CPPS, Peer Specialist, Women's Health and Recovery Project (WHARP), Waukesha, Wis.

5) Suicide, Cancer, and Managing Relationships

Guava

This workshop will review some of the research and statistics related to suicide and apply these to individuals who have received a cancer diagnosis. The focus will then shift to how to help a cancer patient navigate conflictual relationships and find more effective support.

Objectives

1. Participants will apply research on suicide in cancer patients.
2. Participants will learn about some of the complications that can arise in familial relationships when a cancer diagnosis occurs.
3. Participants will learn when to take a break from unhealthy relationships.
4. Participants will discover how and when to return to these relationships.

Will Hutter - PsyD, LMFT, Gender Services Specialist, Sand Ridge Secure Treatment Center, Mauston, Wis.

6) Crisis 101

Africa 60

Nuts, bolts and common sense when working in crisis.

Objectives

1. Participants will understand what the CASE approach is and where to find additional resources.
2. Participants will be able to identify at least common diagnosis that require further assessment and intervention.
3. Participants will identify 3 intervention techniques to use when working with someone in crisis.

Jeff Lewis - LCSW, MSW, Administrator Waukesha County Mental Health Department, Waukesha, Wis.

7) Residential Crisis Stabilization Panel

Africa 20

Crisis stabilization facilities are short-term, community-based settings, offering an alternative to inpatient psychiatric hospitalization or utilized as a step-down from psychiatric hospitalization. These facilities are designed to serve individuals experiencing behavioral health crises by providing stabilization and support in a rehabilitative environment. As Wisconsin continues to develop efforts and initiatives within the crisis services spectrum, further examination of the current stabilization landscape, both statewide and nationally, is necessary. Expansion and enhancement efforts in this area of the crisis continuum will transform the provision of crisis care, aid to mitigate hospital recidivism, and increase the community's ability to provide somewhere safe for persons experiencing a crisis to go.

Objectives

1. Participants will learn about the evolution of crisis stabilization facilities in Wisconsin, how the facilities are utilized, and the role stabilization facilities play in the overall crisis continuum.
2. Participants will learn about the development of Youth Crisis Stabilization Facilities (YCSF) in Wisconsin under Wis. Admin. Code Ch. DHS 50 and how YCSF's face unique challenges serving youth in crisis.
3. Participants will gain an understanding of national standards and best-practices for effective crisis stabilization facilities and crisis stabilization services.

Trisha Stefonek - LMFT, Director of Behavioral Health, Acute Care, North Central Health Care, Wausau, Wis.

Katrina Schwingle - MS, Program Manager, Youth Crisis Stabilization Facility and Multisystemic Therapy programs, Wisconsin Community Services, Milwaukee, Wis.

Travis Atkinson - MS, LPC, TBD Solutions, Grand Rapids, MI

Beth Rudy - Youth Crisis Coordinator, Bureau of Prevention Treatment and Recovery, Division of Care and Treatment Services, Wisconsin Department of Health Services, Madison, Wis.

Jenna Suleski - LPC, Crisis Services Coordinator, Mental Health Section, Division of Care and Treatment Services, Wisconsin Department of Health Services, Milwaukee, Wis.

Lance Pitts - YCSF Supervisor

8) The Art & Science of Multiculturally Responsive Suicide Prevention: Best Practices for MH Clinicians - Part 1

Africa 70

Suicide—a leading cause of death in the United States—is widely acknowledged as a public health crisis. However, the unique dynamics of suicidality among marginalized communities are often overlooked in suicide prevention research and practice. This is especially alarming in light of recent data showing that suicide rates have disproportionately increased among Black Americans. The focus of this two-part session is best practices for mental health clinicians assessing and responding to suicidality among clients who are Black, indigenous, or people of color (BIPOC). We will consider risk and protective factors unique to BIPOC and the impact of historical and cultural contexts of suicidality in this population (e.g., intergenerational transmission of trauma, socioeconomic inequity, racial trauma). Throughout the workshop, specific tools and implications for clinical practice will be discussed.

Objectives

1. Participants will be able to describe the epidemiological scope of suicide as a public health issue, and its prevalence and impacts on BIPOC communities.
2. Participants will be able to identify and describe best practices in suicide risk assessment and intervention with individuals at heightened risk of suicide.
3. Participants will be able to summarize suicide risk and protective factors unique to BIPOC, historical contexts for these factors, and implications for providers.
4. Participants will be able to identify helpful provider attitudes and behaviors, and culturally sensitive assessment and intervention strategies, for working with BIPOC individuals at risk for suicide.

Andrew Schramm - PhD, Assistant Professor of Surgery, Division of Trauma & Acute Care Surgery, Department of Psychiatry & Behavioral Medicine, Medical College of Wisconsin, Milwaukee, Wis.

Vaynesia Kendrick - BS, MS, Outreach Specialist, Office of Violence Prevention, Milwaukee Health Department, Milwaukee, Wis.

9) Integrating Self and Systems to Effect Transformation: It Begins with Individual Recovery Paradigms

Africa 50

How do we begin the integration of systems and recovery? It begins with a single step from everyone involved. Through the knowledge, understanding and personal implementation of the 10 Fundamental Components of Recovery. Through personal stories, being aware of history and learning from lessons past, we can begin to see where the relationships begin and where recovery-oriented systems of care become reality. Come see how we pull it all together, taking a fantastic journey through the vast universe, using an astronomical analogy to explore the process of system transformation.

9) Continued

Objectives

1. Participants will get a brief understanding and history of systems transformation from Medical to Recovery model of care.
2. Participants will be able to identify the 10 Fundamental Components of Recovery.
3. Participants will have an understanding as to how utilizing the 10 Fundamental Components of Recovery in relationships when engaging with other staff, supports and people in their services can change the paradigm and increase positive outcomes

Alyce Knowlton-Jablonski - ACPS, NCPST, NCWF, Retired Executive Director, Wisconsin Association of Peer Specialists, Inc.

Lunch | Africa West
12 – 1 p.m.

Afternoon Keynote
1 – 2 p.m.

Prisms of Possibilities

Africa West

Over two years in a global pandemic compounded by other crises for many of us has been crippling. With all that has transpired and recent happenings in today's news, many fear this may very well be our new normal. Yet hope looms for us all and on the horizon there are new lessons to be learned. None more important than the way industries now deliver services to one another. // The need for mental health care has never been more evident than it is today! Could it be that an unintended consequence of it all is the change in our collective attitudes towards mental health and the way we view mental health services as a nation? // Some have said that being a therapist right now feels like we are handing out sunscreen to people on fire. So how will we be able to keep up while ensuring that service providers are maintaining their own self care and mental health as well?

Objectives

1. Participants will unpack best practices in service provision.
2. Participants will unpack new approaches in service delivery.
3. Participants will unpack prevention of burnout and self care strategies.

Myra McNair - LMFT, Executive Director, Anesis Center for Therapy, Madison, Wis.

Workshop
Breakout Sessions 10-18
2:30 – 4:30 p.m.

10) How to Recognize and Respond to Common Ethical Dilemmas in Crisis Work – Part 2 of 2

Africa 10

How to recognize and respond to common ethical dilemmas in our clinical work. This workshop will present a framework that will help address those ethical issues that we all face day-to-day in our clinical work. When should we do what our clients want, and when is it justified to follow our own judgment? What rights does the family have, and how do we resolve conflicts when the family and client disagree? When is it justified to breach confidentiality? What are the pros and cons of engaging in involuntary/coercive treatment? What can you, as a crisis worker, do to handle the conflicting emotions that often emerge on such cases? The workshop will not provide answers, but will provide a way of thinking through these and other common dilemmas.

Objectives

1. Participants will gain a better understanding of the justification for and limits of our paternalism or “clinical authority.”
2. Participants will gain a fuller understanding of why boundaries are important, and how they can be used for safety of both clinician and client.
3. Participants will learn how issues of confidentiality can be balanced with other needs in a crisis situation.
4. Participants will be able to process the different conflicting ethical principles inherent in involuntary treatment.
5. Participants will be able to engage in coping mechanisms and self care tied to the ongoing introspection of complex ethical issues in crisis care.

Nancy Pierce - Advanced Clinical Practitioner, MS, LCSW, Mental Health Crisis Consultants, Mt. Horeb, Wis.

Tony Thrasher - D.O., DFAPA Medical Director of Crisis Services, Milwaukee County Behavioral Health Division, Milwaukee, Wis.

11) Connecting Using Motivational Interviewing

Africa 60

Connecting with people in crisis can pose a challenge. This session will explore a few key aspects of the relational and technical aspects of Motivational Interviewing in the context of substance use and crisis. Participants will leave the session with a few skills and strategies to immediately put into practice.

Objectives

1. Participants will be able to describe Motivational interviewing, empathy, change talk, and autonomy.
2. Participants will be able to use, at a basic level, open questions designed to support empathy and evoke change talk.
3. Participants will be able to apply strategies to support autonomy in real world situations.

Mia Croyle - MA, Behavioral Health Project Specialist, MetaStar, Inc., Madison, Wis.

12) Language Challenges in Mental Health and Substance Use

Africa 50

Learn about the latest research on language deprivation and the lasting impact it can have on mental health and substance use in adults who are Deaf. Gain Tools and information on how to identify consumers who may fall in the gap, lacking access to effective services. Find out how you can help stem the ever-widening disparity in services for people who are Deaf, DeafBlind and Hard of Hearing.

Objectives

1. Participants will be exposed to different dynamic language issues and the impact of language deprivation for individuals who are deaf/deaf-blind/hard of hearing with mental health and substance use issues.
2. Participants will be exposed to diagnostic assessment for individuals who are Deaf, deaf-blind and hard of hearing and who are experiencing mental health and/or substance use issues/disorders.
3. Participants will develop a deeper understanding of the complex communication issues involved when working with this population.

Denise Johnson - BSW, Wisconsin Statewide Project Coordinator SUD/MH Services for people who are Deaf, DeafBlind and Hard of Hearing, Independence First, Milwaukee, Wis.

13) Mobile Crisis Teaming Panel

Africa 40

What is mobile crisis teaming? Historically, Wisconsin crisis response has had a single crisis behavioral health specialist or has been paired with law enforcement, in part due to the requirements of Wisc. Stats. Chapter 51. Wisconsin is fortunate to have Crisis Intervention Team (CIT) trained officers. But what if instead of a single behavioral health crisis responder, there was a team? In different parts of the country crisis response teams are being used, pairing a behavioral health responder with other specialists—peers, emergency medical technicians, substance use specialists, etc. Learn more about how communities can explore mobile crisis teams.

Objectives

1. Participants will learn about various national examples of mobile crisis team response and how they relate to the federal National Guidelines for Behavioral Health Crisis Care Best Practice Toolkit described in Crisis Now.
2. Participants will be able to identify expanded and diverse roles of trained primary and secondary mobile crisis responders—including certified peer support specialists, adult protective services staff, emergency medical technicians, specialty substance use disorder staff, etc.
3. Participants will understand what core competencies are part of the mobile crisis team response.
4. Participants will be able to describe ways mobile crisis teams can bring greater diversity and improved engagement into the intervention while laying the groundwork for prevention, harm reduction, and follow-up support.
5. Participants will learn about Medicaid reimbursement opportunities for mobile teaming services in Wisconsin.

Vaughn Brandt - BA, Behavioral Health Specialist, Wisconsin Department of Health Services, Division of Medicaid Services, Madison, Wis.

Liz Bartz - MS, Program Manager, Youth Crisis Stabilization Facility and Multisystemic Therapy programs, Wisconsin Community Services, Milwaukee, Wis.

Brianne Zaborowski - Lead Crisis Coordinator from State DHS Bureau of Prevention Treatment and Recovery (BPTR)

Marjorie Blaschko - MS, LPC, Therapies Consultant, Behavioral Health Section, Bureau of Benefits Policy, Division of Medicaid Services, Madison, Wis.

14) Suicide Among Older Adults

Africa 80

Older adults are at higher risk of dying by suicide than younger and middle-aged adults. Most older adults who die by suicide suffer from depression, which we can identify and treat - which means that many elder suicides could be prevented. We will discuss how to assess suicide risk in older adults, and evidence-based strategies for reducing risk.

Objectives

1. Participants will appreciate the higher risk of suicide in older adults.
2. Participants will describe how to assess the risk of suicide in an older adult.
3. Participants will be able to list strategies for reducing the risk of elder suicide.

Art Walaszek - MD, Professor of Psychiatry, University of Wisconsin School of Medicine & Public Health, Madison, Wis.

15) Burnout, Compassion Fatigue, and Self-Care

Africa 30

This workshop will look at the ways burnout and compassion fatigue are similar and different and ways to engage in self-care that can ground and recharge you. The workshop will end with an exercise involving guided imagery, led by the presenter.

Objectives

1. Participants will learn about the stages of burnout.
2. Participants will be able to identify ways to recover from burnout.
3. Participants will discover ways to combat compassion fatigue.
4. Participants will practice self-care exercises.

Will Hutter - PsyD, LMFT, Gender Services Specialist, Sand Ridge Secure Treatment Center, Mauston, Wis.

16) The Prism Program's First Year: Lessons Learned in LGBTQ+ Peer Support

Guava

The Prism Program is a peer-support program with a mission to increase access to care and cultivate community to promote mental wellness in LGBTQ+ youth in Wisconsin. We're a team of queer and/or trans Certified Peer-Specialists trained to use our lived experiences with mental health and substance use struggles to walk alongside others in their recovery journey. Prism provides free support for LGBTQ+ youth around the ages of 14-26 years through a warmline, one-on-one mentoring, and support groups. In addition to youth, Prism peer-specialists also support LGBTQ+ adults and provide resource referrals to caregivers of LGBTQ+ youth. The entire Prism team has worked hard to develop and promote the program, learning valuable lessons about program planning along the way.

Objectives

1. Participants will understand how peer-support can be a protective factor for the mental health of the LGBTQ+ population.
2. Participants will understand The Prism Program's history, mission, and services.
3. Participants will learn early evaluation findings after Prism's first year of implementation.

Erica Steib - MPH, CPS, Prism Program Coordinator and Suicide Prevention Specialist, Mental Health America of Wisconsin, Milwaukee, Wis.



17) The Art & Science of Multiculturally Responsive Suicide Prevention: Best Practices for MH Clinicians - Part 2

Africa 70

Suicide—a leading cause of death in the United States—is widely acknowledged as a public health crisis. However, the unique dynamics of suicidality among marginalized communities are often overlooked in suicide prevention research and practice. This is especially alarming in light of recent data showing that suicide rates have disproportionately increased among Black Americans. The focus of this two-part session is best practices for mental health clinicians assessing and responding to suicidality among clients who are Black, indigenous, or people of color (BIPOC). We will consider risk and protective factors unique to BIPOC and the impact of historical and cultural contexts of suicidality in this population (e.g., intergenerational transmission of trauma, socioeconomic inequity, racial trauma). Throughout the workshop, specific tools and implications for clinical practice will be discussed.

Objectives

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Andrew T. Schramm - PhD, Assistant Professor of Surgery, Division of Trauma & Acute Care Surgery, Department of Psychiatry & Behavioral Medicine, Medical College of Wisconsin, Milwaukee, Wis.

Arnitta Holliman - MS, LPC, Director, Office of Violence Prevention, City of Milwaukee, Milwaukee, Wis.

Waynesia Kendrick - BS, MS, Outreach Specialist, Office of Violence Prevention, Milwaukee Health Department, Milwaukee, Wis.

18) How Can We Be the Most Helpful: Practical Strategies for Critical Engagement

Africa 20

Individuals accessing residential crisis stabilization services experience a broad variation in length of stay, with some stays as brief as 3 days and others as long as 30 days or more. Regardless of time in treatment, engaging the individual in treatment is the most important challenge facing crisis stabilization providers. In this session, learn the critical components of client engagement, and the data connecting hope, effectiveness, and length of treatment.

Objectives

1. Participants will understand three critical components to client engagement in crisis residential settings.
2. Participants will be exposed to critical tools to measure client engagement and treatment effectiveness, and the importance of measurement-based care in crisis residential services.

18) Continued

3. Participants will identify a blueprint for measuring and improving client engagement in their own crisis programs.

Travis Atkinson - MS, LPC, TBD Solutions, Grand Rapids, MI

Reception | Africa West 4:30 – 6 p.m.

Join us for a generous mix of hors d'oeuvres and a cash bar.

7 – 8 p.m.

Evening Yoga with Julia Smith

Africa 90

Julia Smith - LMFT, C-IAYT, Owner, Be Grounded Mental Health & Yoga Therapy, Madison, Wis.

Friday • September 16, 2022 Day 2

6 – 6:45 a.m.

Morning Yoga with Julia Smith

Africa 90

Our morning yoga class will focus on waking up the body and mind, bringing focus and attention. The class will set us up for a day of learning.

Julia Smith - LMFT, C-IAYT, Owner, Be Grounded Mental Health & Yoga Therapy, Madison, Wis.

Breakfast | Africa West 7:30 – 8:30 a.m.

Workshop Breakout Sessions 19-27 8:30 – 10:30 a.m.

19) Hmong Mental Health

Africa 50

Although the Hmong have been in the United States for over 45 years, there continues to be limited culturally appropriate resources to properly address the well-being of the Hmong community. This presentation will provide a cultural history of the Hmong, what led them to the United States, current challenges, and the mental health needs of the Hmong community.

Objectives

1. Participants will learn about the cultural beliefs of the Hmong.
2. Participants will learn about the history of the Hmong.
3. Participants will understand how Hmong cultural beliefs and history influence healthcare decisions.

Peng Her - Chief Executive Officer, The Hmong Institute, Madison, Wis.

20) Applying Multicultural Competencies in Cross-Cultural Supervision

Africa 20

All supervision is multicultural supervision. "If culture is part of the environment, and all behavior is shaped by culture, then culture-centered counseling (supervision) is responsive to all culturally learned patterns" (Pedersen, 1997, p. 256). Supervisors must embody cultural humility, multicultural awareness and openness to explore the effect it has on the supervisory relationship. It is an essential role of supervisors to develop supervisees in multicultural competencies and should model these competencies in supervision. This workshop will benefit those who supervise in any Behavioral and Mental Health Clinic setting, Child welfare and anyone in a leadership role at their agencies.

Objectives

1. Participants will learn about cultural sensitivity and humility.
2. Participants will learn mindful intercultural communication - improve communication within your team and the supervisory relationship with your supervisor.
3. Participants will learn how culture goes beyond race and ethnicity.
4. Participants will learn how to apply competencies in the workplace.
5. Participants will learn the principles of multicultural supervision and cross-cultural supervision.

Myra McNair - LMFT, Executive Director, Anesis Center for Therapy, Madison, Wis.

21) Chapters 51 & 55: A Legal Perspective from Both Sides of the Courtroom

Africa 30

This presentation will provide an overview of Wisconsin Chapters 51 and 55, and their applications in the courtroom. Based on litigation experiences on both sides of the bench as a prosecutor and a defense attorney, this presentation will outline for you not just the basics of these cases, but tips that each side will be looking for.

Objectives

1. Participants will review the legal framework of Chapters 51 and 55 and their legislative intent.
2. Participants will understand the basic standards of dangerousness and how they apply in context.
3. Participants will recognize the various steps in the legal process.
4. Participants will be prepared to seek least restrictive alternatives for your case, but also be able to explain why they were not appropriate given the circumstances.

Jessica Moeller - J.D., Criminal Justice Department Director and Professor, Wisconsin Lutheran College, Milwaukee, Wis.

22) Pocket Wellness Recovery Action Plan: A Blueprint for prevention of Crisis Recidivism

Africa 10

Wellness Recovery Action Plans is a plan used to cope with major and minor challenging stressors that people encounter in everyday living. They are self-management plans, meaning that they are voluntarily written by the individual and then implemented when a stressor is impeding the individual's goal. When developed before and immediately after a crisis, a W.R.A.P. can assist the person to avoid another crisis and/or hospitalization. The plan also assists crisis personnel when attempting to deescalate a crisis, as they have the solution to certain stressors listed directly in the plan and the person's own solutions for dealing with the stressor that may be causing the crisis. Pocket W.R.A.P. is targeted at key stressors. Participants will engage in developing their own Pocket W.R.A.P. based on stressors in their own lives and leave having a plan to deal with those situations in advance of their occurrence. W.R.A.P. is a self-management tool that can be, and might I say, should be used by everyone and anyone, not just those in services or those in crisis.

Objectives

1. Participants will be able to identify and understand the accepted Recovery Principles.
2. Participants will participate in the development of a personal Pocket W.R.A.P. based on their own life stressors.
3. Participants will be able, through this exercise, to utilize an individual's W.R.A.P. in assisting them through a Crisis.

Alyce Knowlton-Jablonski - ACPS, NCPST, NCWF, Retired Executive Director, Wisconsin Association of Peer Specialists, Inc.

Evonne Kundert - BA, MDiv, NCPST, NCGF, NCWF

23) Engagement and Empathy in the Era of the Open Note

Africa 70

An interactive look examining how Open Notes (as mandated by CMS) affect the crisis environment. We will examine not only the legal components and appropriate staff safety components, but even more importantly... we will look to see how we can use this transparency to increase engagement! The discussion will then focus upon specific ways in which this increase in engagement with our patients can manifest in increased insight, rapport, and positive outcomes.

Objectives

1. Participants will process how the topics of engagement and empathy are interrelated.
2. Participants will focus on five ways in which improving engagement benefit both patient and treatment team.
3. Participants will discuss how these interventions/ approaches can not only assist clinically but also can manifest positively in the Era of the Open Note.
4. Participants will examine how we can improve our own documentation to be more patient centered, trauma informed, and uplifting!

Tony Thrasher - D.O., DFAPA Medical Director of Crisis Services, Milwaukee County Behavioral Health Division, Milwaukee, Wis.

24) Co-Responder Models with Police

Africa 40

Crisis Intervention Teams (CIT) roots date back to 1988, following the fatal shooting of a person with mental illness by the Memphis police department. It has subsequently become the recognized standard for law enforcement response to individuals with mental illness. Specially trained officers are better prepared to respond to an individual in a behavioral health crisis. In recent years, various co-responder models have been increasingly used to pair law enforcement with behavioral health specialists or clinicians. Some models have law enforcement and crisis clinicians respond in the same vehicle; some have a dedicated crisis responder to pair with law enforcement; some law enforcement agencies hire behavioral health specialists to work with their officers. In this workshop, you will learn about co-responder models generally and some Wisconsin models. There is evidence that suggests these models may improve access to care and could potentially reduce arrests.

Objectives

1. Participants will be able to identify several different co-responder models, who is active on the team, and how crisis situations are approached.
2. Participants will understand the role of dispatch and to what types of situations co-responder teams are dispatched.
3. Participants will be able to describe the relative advantages (and potentially any challenges) to the co-responder response.

Lita Prorok - MS, LPC, Co-Response Coordinator, Eau Claire Police Department, Eau Claire, Wis.

Jacqueline White - Deputy Sheriff, Crisis Assessment Response Team, Marathon County Sheriff Office, Wausau, Wis.

Jenny Wrucke - LMFT, Health & Human Services Coordinator, Crisis Intervention & Chapter 51 Court Services, Waukesha County DHHS Clinical Services Division, Waukesha, Wis.

Amy Watson - Moderator - PhD, Professor, Helen Bader School of Social Welfare, University of Wisconsin-Milwaukee, Milwaukee, Wis.

25) 988

Africa 80

After July 16, 2022 anyone in mental health distress is able call or text 988 or use the chat function via suicidepreventionlifeline.org to connect with a counselor. Wisconsinites who use 988 will connect with Wisconsin Lifeline, an in-state call center where trained counselors answer calls, chats, and texts. This new and easy way to access mental health support has many implications for behavioral health providers and county crisis programs.

Objectives

1. Participants will learn about Wisconsin Lifeline and what services are provided through 988.
2. Participants will have an understanding of how the state's 988 provider, Wisconsin Lifeline, Wisconsin Department of Health Services, and county crisis programs interact.

Shelly Missall - Outreach Coordinator from Wisconsin Lifeline

Brianne Zaborowski - Lead Crisis Coordinator from State DHS Bureau of Prevention Treatment and Recovery (BPTR)

Betsy Johnson - LPC, Clinical Program Manager-Clinical Services, Manitowoc County Human Services Department, Manitowoc, Wis.

Jenna Suleski - LPC, Crisis Services Coordinator, Mental Health Section, Division of Care and Treatment Services, Wisconsin Department of Health Services, Milwaukee, Wis.

26) Hearts in Minds: Why Love Will Save the Behavioral Health Crisis System

Africa 60

While emergency behavioral health services in the United States emphasize safety and risk management, the greatest advances to these systems have come from people and communities that have valued empathy, compassion, and choice above all. From Crisis Intervention Teams to Crisis Call Centers and peer respite homes, this professional expression of love carries both risk and reward. Learn how love in the behavioral health crisis system brought us here, and how it is our best hope for the future of mental health, suicide prevention, and community wellness.

Objectives

1. Participants will understand the evolutionary history of behavioral health crisis care.
2. Participants will be able to identify three areas where compassionate risk tolerance leads to better clinical outcomes.
3. Participants will expand their knowledge of crisis system innovations and practices.

Travis Atkinson - MS, LPC, TBD Solutions, Grand Rapids, MI

27) Keynote Breakout Session "Understanding Ableism"

Guava

An active discussion that will provide attendees with the tools to recognize and reduce/eliminate potential ableism in their field, especially as it pertains to mental health; To guide attendees to feel comfortable and confident enough when working with people with disabilities to focus on the task without allowing their thoughts and feelings about the disability to take over; To treat someone's disability as a factor, rather than an identity.

Santina Muha - Speaker, Writer, Actor, Storyteller, Host

Break with Food | Africa West
10:30 – 11 a.m.

Closing Keynote
11 a.m. – 12 p.m.

Disability and Inclusion: Nothing About Us Without Us

Africa West

In this lively keynote, Santina will talk about the difference between physical disability and cognitive disabilities. She will speak on her personal journey of recovery from her accident. She will also address the correlation between disabilities and mental health. The audience will understand how to strike a balance between understanding what a person truly needs and what they simply cannot do. Finally, she will speak to how the pandemic has impacted disability access.

Santina Muha - Speaker, Writer, Actor, Storyteller, Host

Closing | Africa West
12 – 12:15 p.m.

Morning Keynote
9/15/2022

8:30 a.m. – 9:45 p.m.
The “Alternatives to Suicide” Approach to Crisis: Imagination, Common Sense, and Reducing Harm
Africa West



Caroline Mazel-Carlton

Director of Training, Western Massachusetts Recovery Learning Community, Director of Training, Wildflower Alliance, Holyoke, Mass.

Caroline Mazel-Carlton has laid her head in a number of places, from Indiana jail cells to Texas psychiatric units, but now channels her lived experience with crisis into creating innovations in support at the Wildflower Alliance based in Western Massachusetts. The Wildflower Alliance includes Afiya House, a World Health Organization recognized best practice in crisis alternatives, among many other supports offered in community and inpatient settings. Since moving out of a staffed psychiatric residential facility in 2009, Caroline has worked tirelessly to create change in the mental health system and has also developed and re-defined crisis support in a number of settings across the globe from North Carolina to Western Australia to Brazil. Caroline’s passion is centering and exploring the experiences that are often the most silenced, such as suicide, trauma and non-consensus reality states. Her work with “Alternatives to Suicide” and the Hearing Voices Network has been featured in popular media outlets such as the New York Times, Foreign Policy and O magazine. Caroline has contributed to multiple academic publications on the topic of suicide and one book on her experience skating on a roller derby team as #18 “Mazel Tov Cocktail.” She was recently profiled in NYT best-selling author Daniel Bergner’s new book “The Mind and the Moon.”

Afternoon Keynote
9/15/2022
1 a.m. – 2 p.m.
Prisms of Possibilities
Africa West



Myra McNair

LMFT, Executive Director, Anesis Center for Therapy, Madison, Wis.

As founder and owner, Myra is the visionary behind Anesis Therapy. With a desire to bring more culturally sensitive mental health services to Dane County, she started the clinic in 2016 as the only therapist and has collaboratively transformed it into a practice of over 40 staff members.

Building and training the next generation of mental health workers is another one of Myra’s passions. Along with providing a robust clinical internship program at Anesis, Myra is an Adjunct Professor for the Marriage and Family Therapy Program at her alma mater, Edgewood College, and is a consultant and mentor in the UW Infant Mental Health Program from which she also graduated. Myra is the community coordinator of the Raising Safe Families Together program, where she trains community workers and agencies in the Adults and Children Together (ACT) curriculum.

Myra utilizes a variety of therapy modalities to meet her clients’ needs. While her clinical outlook is largely rooted in psychoanalytic and narrative therapies, Myra also utilizes Eye Movement Desensitization and Reprocessing (EMDR) therapy, Hypnotherapy, Trauma-Focused Cognitive Behavioral Therapy (TF-CBT), Child Parent Psychotherapy (CPP) and Brainspotting.

Myra has received numerous awards for her fierce service and leadership in the field of mental health. She received the NAMI Dane County 2020 Mental Health Trailblazer award, the Black Chamber of Commerce 2020 Eagle Award, and the Wisconsin Alliance on Infant Mental Health Spirit Award. In 2022, Myra was named one of Brava Magazine’s “Women 2 Watch.” She was recognized in Business Magazine’s “40 under 40”, and as a Health Innovator in the 2017 “M List.”



Santina Muha - Speaker, Writer, Actor, Storyteller, Host

Santina has been a performer at the Upright Citizens Brigade theater since 2015. In that time, she’s written and performed a one woman show, been on a house team, performed stand-up been a monologist for their flagship show, and hosted and performed in several shows. Currently she is host of “Rollin’ with my Homies,” a popular show where she places comedians in wheelchairs to raise awareness while making people laugh. She also helped make UCB one of the only theaters with fully wheelchair accessible stages throughout all of their locations. She is a recipient of the Christopher Reeve Acting Scholarship and the UCB Diversity Scholarship, and now sits on the UCB Diversity Committee. When appropriate, Santina has mastered the use of comedy and levity in her speeches and has a unique way of making her audiences feel comfortable having fun while listening and learning.

Her “Ask a Woman in a Wheelchair” series on BuzzFeed has received over 10 million hits and counting. She is also a frequent podcast guest on everything from spiritual to comedic to inspirational to pop culture to beauty podcasts.

Santina played a recurring character on Netflix’s “One Day at a Time,” and has appeared in several films including opposite Joaquin Phoenix in Gus Van Sant’s most recent film “Don’t Worry, He Won’t Get Far on Foot.” Her film “Take it Back,” which she co-wrote, co-produced and starred in, was recently nominated for best film in the Easterseals Disability film challenge. Santina has many other projects in the works as well!

As someone who was paralyzed in an auto accident at the age of five years old and has used a wheelchair since, Santina excelled academically throughout school, was a cheerleader in high school, was social chair of her sorority in college, lived on her own right out of college, and moved across the country without any assistance a few years after that with the goal of living and working in Los Angeles, which she is currently doing. She is living proof that everyone can and should follow their dreams, no matter what obstacles one may face along the way.

Closing Keynote
9/16/2022

11 a.m. – 12 p.m.
Disability and Inclusion:
Nothing About Us Without Us
Africa West

Conference Evaluations

A link to evaluate the conference will be posted in Whova on Friday, September 16, 2022.
This link will also be emailed to all participants.

Continuing Education Hours

Continuing Education Hours are a measure of participation in continuing education programs. The 2022 Crisis Intervention Conference has been approved for a maximum total of 9.75 Continuing Education Hours by the National Association of Social Workers, Wisconsin Chapter. To receive your personalized, printable Certificate of Continuing Education Hours, please follow the link posted in Whova on Friday, September 16, 2022. This link will also be emailed to all participants. Individuals should consult with their professional association and/or licensing board regarding the applicability of the conference for their profession. It is the individual's responsibility to report CEHs earned to their appropriate credential or licensing board.



“Thank YOU!”

Conference Planning Committee

- Brad Munger, Co-Chair
- Dr. Will Hutter, Co-Chair
- Liz Bartz
- Susan Barrett
- Tracy Faust
- Alyce Knowlton-Jablonski
- Evonne Kundert
- Jeff Lewis
- Nancy Pierce
- Stacy Rohleder
- Leah Rolando
- Debi Traeder
- Cartoon Vue
- Ashley Williams

Conference Exhibitors

- Conference Exhibitors
- Community Medical Services
- Disability Rights Wisconsin
- Exodus Transitional Care Facility
- Granite Hills Hospital
- NAMI Wisconsin
- Northwest Connections
- Nova Counseling Services
- Inclusa
- Ottawa University
- Oxford House, Inc.
- REDI Transports
- Rogers Behavioral Health
- Tellurian Behavioral Health
- University of Wisconsin-Stevens Point Continuing Education and Outreach
- Viterbo University
- Willow Creek Behavioral Health
- Wisconsin Council on Problem Gambling
- Wisconsin Department of Health Services Division of Care and Treatment Services
- Wisconsin Hospital Association Bed Locator
- Wisconsin Lifeline - Family Services
- Wisconsin Office of Children's Mental Health
- And More!

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