

2020 Virtual Fall Conference

Co-occurring Conditions: Current Issues &
Treatment for Mental Health & Addiction

Session One



Opening Session: Ethics Through a Moral Courage Lens

2.0 Ethics CEUs

October 22, 2020 | 1:30 - 3:30 CDT

Dr. Laurie Dahley PhD, MSW, LISW | Associate Professor & Field Program Coordinator

Department of Social Work-Concordia College

When learning about ethics, we often focus solely on our Code of Ethics and decision-making models. But does this framework leave out an important component? When faced with an ethical dilemma do we have the moral courage to do what our critical thinking process informs us as the best course or do other factors subjugate our decisions? This session will build on work by Bryan, Sanders, and Kaplan on moral courage and offer participants a chance to understand their moral courage barometer. Personal exploration and case studies will be used to guide our contemplation of this concept in relation to our practice.

Learning Objectives:

- Recognize the role of moral courage in our decision-making process when faced with moral dilemmas
- Identify factors that could serve as protection or risk factors when implementing courageous decisions
- Strategize ways to move forward with confidence in our ability to practice with courage

Laurie Dahley

Dr. Laurie Dahley has over 40 years in her social work career and brings her practice experience along with her academic research to this presentation. She brings stories from the field, as well as what the literature tells us, to assist the participant in understanding how moral courage (or lack thereof) impacts our processing of ethical dilemmas. Dr. Dahley has served on the boards of the Minnesota Board of Social Work and the Minnesota Social Service Association. These board experiences have also informed her perspective when exploring ethical issues in practice. She is on faculty at Concordia College's Social Work Program and makes her home in the beautiful lakes area in Minnesota.

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Session Two



The Underdiagnosis of ADHD in Women and Girls: Awareness & Action

1.0 CEU

Dr. Jane Indergaard DNP, RN | Assistant Professor of Nursing-Concordia College

Women and girls with ADHD are often overlooked and misdiagnosed for years before receiving proper diagnosis and treatment. Reasons include a number of factors, among them being differences in coping and symptom profile. The impact of un-diagnosis or misdiagnosis compounds challenges with overall mental health, achievement of life goals and later treatment. Dr. Indergaard is part of a national panel of ADHD advocates who have been presenting on the topic at regional and national conferences across the country. She will discuss what we know about the diagnosis, treatment and management of ADHD from the female perspective and share stories of the lived experience gathered by those who have had a late diagnosis and how they have learned to manage their condition and thrive.

Learning Objectives:

- Describe the facts and contributing factors for gender disparity in the frequency and prevalence of ADHD diagnosis (why do girls get missed?)
- Identify how the ADHD symptom profile may differ for females, articulating what is meant by "hiding in plain sight"
- Analyze the challenges, toll, and outcomes of a missed or late diagnosis of ADHD on a female's self-esteem, mental and personal health, achievement of goals, and the effectiveness of treatment
- Formulate a personal / professional plan for what you as a parent, teacher, physician or treatment provider can do for earlier identification of possible ADHD in a girl or woman and correct under-diagnosis

Dr. Jane Indergaard

Jane is a professor of nursing at Concordia College in Moorhead, MN and licensed as a registered nurse in ND and MN. She teaches courses in Nursing Research, Mental Health Nursing, Advanced Adult Health Critical Care Nursing, and Fundamentals of Nursing. She is also the local founder and co-coordinator of the 2014 national award winning *Red River Valley CHADD Satellite* – a branch of the National Organization: *Children and Adults with Attention Deficit Hyperactivity Disorder* (CHADD). Among her research and clinical interests are the design, application and implementation of Psychoeducational (PE) programming into provider treatment for ADHD and promoting early diagnosis and treatment for women with ADHD. She is also currently working on programming for implementation of culturally sensitive care, education, and advocacy for mental illness in Global Health and global educational partnerships for nursing education and development in Tanzania.

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Session Three



Co-occurring Assessment: Tips & Methods to Make Your Assessment Great

1.5 CEUs

Glenn Maloney MSW, LICSW, LADC | Psychotherapist, Drug & Alcohol Counselor

Genesis Recovery Services

In our day-to-day work, we see many assessments that are less than professional, and this problem sometimes increases as we attempt to pull the assessment lens back to a co-occurring focus. This session is meant to help the assessment writer further capture the ability to write professionally and with strength. Additionally, it focuses on the many ways to spot and interpret what a client is truly saying during the assessment interview to best understand the client and paint the clearest picture of them possible in the assessment.

Upon completion learning will have:

- Strategies to improve writing competence
- Best practices to document assessments through stronger knowledge of co-occurring disorders
- Insight into interpreting client responses
- Methods to better understand client non-verbal communication

Glenn Maloney

Glenn is a psychotherapist and drug counselor who provides direct service at the College of Saint Scholastica and Genesis Recovery Services, both in Duluth, Minnesota. He also finds work as an adjunct instructor at colleges in the Duluth area, and has designed and instructed MSW level classes on co-occurring disorders and the assessment of substance use disorders. He has previously presented at the Saint Louis County Health and Human Services Conference on assessment of co-occurring disorders. Glenn's bachelor of arts degree is in mass communication with an emphasis on journalism, and he feels that the focus on interviewing and writing gained through this work is highly related to his work as an assessor today. Glenn is highly regarded as a co-occurring clinician in his community, was the recipient of an award from the Milwaukee Press Club in 2002 for work done in a television news class, and has published poetry and prose regarding mental health. Publications include "Doll Hospital Journal," and "The Thunderbird Review." Outside of academic and professional pursuits, Glenn enjoys running, camping, and the outdoors and spending time with his eleven-year-old daughter and seven-year-old beagle.

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Session Four



Lessons Learned from the Community Navigator Program: Enhancing Access to Treatment and Recovery

1.0 CEU

Jennifer Holtz | Program Manager-Community Navigator Program

Around 400,000 people in Minnesota and 52,000 in North Dakota meet criteria for a Substance Use Disorder, yet less than 20% of people who need treatment receive it. For those who do receive treatment, they have a relapse or a recurrence of between 40-60%. Our healthcare systems face unique multidimensional challenges in helping patients with harmful drug and alcohol use find services. Through a community wide effort in Cass County ND and Clay County MN, a model of intervention and referral was developed. The Community Navigator pilot project has successfully eliminated or reduced barriers to accessing treatment by partnering with providers to address the core issues that prevent people from seeking help when they need it. By providing support, information and warm referrals for treatment, the FirstLink 2-1-1 Community Navigator program provides supportive interventions that, when combined with strategies for coordinating referrals for behavioral health services improve patient health outcomes. This Presentation will discuss practical strategies that health and human service professionals or other caregivers can implement that will reduce barriers and enhance outcomes for recovery.

Upon completion learners will be able to:

- Understand the four most common barriers to accessing substance use treatment
- Identify three pathways to recovery
- Name at least one strategy for reducing or eliminating a barrier for seeking substance abuse treatment

Jennifer Holtz

Jennifer began managing the Community Navigator program in 2018 when it first began as a pilot project in Cass County ND and Clay County MN to connect people with substance abuse treatment. She holds a Masters degree in Public, Human Service and Health Administration from Minnesota State University Moorhead and a Bachelors degree in Psychology from the University of North Dakota. In her nearly 20 years of professional experience, Jennifer's work has spanned public and non-profit sectors in both direct care as well as in administrative roles, working with children and adults. Jennifer's professional interests center around public policy and system reform, strategies for enhancing coordination across systems of care to maximize the benefits of services delivered and improving recovery outcomes of those stigmatized by mental health conditions through meaningful engagement with the community.

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Session Five



The Dynamics of Farm Stress

1.0 CEU

Monica McConkey MA, LPC | Rural Mental Health Specialist-Eyes on the Horizon Consulting, LLC

For the past 6 years farmers and ranchers have experienced a significant downturn in the farm economy. This downturn coupled with severe weather challenges in the 2019 growing season have been difficult for farmers and farm families.

This session will help create an understanding of the unique stressors associated with farming and ranching and will provide an overview of the tools and strategies effective in addressing the mental health needs of this population. This session will highlight the key resources available to support farmers experiencing mental health challenges and discuss best practices providers can use when working with this population.

Upon completion learners will:

- Gain an understanding of the unique stressors experienced by farmers and ranchers
- Learn strategies and tools in addressing mental health needs of this population
- Become aware of resources specific to addressing stress in agriculture

Monica McConkey

Monica Kramer McConkey has 25 years of experience in the behavioral health field as a counselor, program supervisor and administrator. Her focus throughout her career has been to increase access to, and remove the stigma often attached to mental health services. Monica grew up on a farm in northwestern Minnesota and has intimate understanding of the dynamics leading to farm stress and its impact on farm families. She currently works as one of two Rural Mental Health Specialists in Minnesota providing support to farmers and their families through the MN Dept of Agriculture. Monica also travels throughout the country speaking on the impact of Emotional Stress on the Farm through her consulting business Eyes on the Horizon Consulting, LLC.

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Session Six



Debriefing as an Organizational Support for Self-Care

1.5 CEUs

Pete Singer | Lead Consultant-Advanced Trauma Consulting

Burnout and Secondary Traumatic Stress (STS) can impact nearly everyone in mental health, addiction, advocacy education, human services, and other areas of emotional labor. Whether it stems from high and changing demands; hearing about trauma; inability to process the problems plaguing clients, students, families, and systems; aggressive behavior; conflict with coworkers or supervisors; or some other source, the effects are undeniable. They lead to poorer staff performance, decreased student and client success, turnover, unscheduled time off, and more. Staff are told to use self care, but research shows that it has little chance to ameliorate these concerns without organizational support. Routine and critical incident debriefing has proven effective as an organizational response. This presentation reviews related research and different options for providing this crucial support.

Upon completion learners will be able to:

- Articulate the importance of self-care
- Identify methods of self-care and organizational supports for self-care
- Explain how debriefing may assist with self-care

Pete Singer

Pete is a Licensed Independent Clinical Social Worker with over 28 years experience in multiple settings, including residential, home-based, outpatient psychotherapy, schools, and management. He received his MSW from the University of Minnesota. His counseling practice focuses on children who have experienced trauma. He uses Trauma-Focused Cognitive Behavioral Therapy and is a certified parent educator/supervisor with Circle of Security-Parenting. He completed a Certificate Program on Trauma-Effective Leadership from the University of Minnesota. Pete started and is Director of a small non-profit that works to equip the community to better recognize, respond to, and prevent child maltreatment. He is the President and Lead Consultant with Advanced Trauma Consulting. In that role, he trains, consults, and writes regarding trauma, trauma-informed practice, and staff support in the legal, education, health, faith, and child welfare systems. Recent presentations include the Academy on Violence and Abuse Global Summit, Minnesota School Social Workers Association, and more.

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Session Seven



Therapeutic Response & Crisis Intervention

1.5 CEUs

Dr. Shauna Eberhardt PhD, LPCC, LADC | Clinical Director-Southeast Human Services

Therapeutic Response is an adaptive training provided to all DHS employees and community members for the purpose of increasing knowledge of the process of high risk behavior and crisis response and de-escalation. This training is based on the principles of Crisis Prevention and Intervention (CPI), a nationally recognized best-practice training for therapists in the field of Behavioral Health.

Upon completion learners will be able to:

- Explain the differences of reactive vs proactive behavior
- Identify risk factors for behavior
- Identify stages of challenging behavior and associated helping interventions

Learners will take away:

- An increased knowledge of safety measures
- An increased awareness into their own values and biases when working with clients

Shauna Eberhardt

Shauna is a Licensed Professional Clinical Counselor and Licensed Addiction Counselor. She holds a PhD in Counselor Education and Supervision and is currently employed as the Clinical Director for Southeast Human Service Center. She has taught at Capella University and is a regular speaker at community conferences.

Shauna is a certified trainer in therapeutic response through the Division of Human Services and currently works with a co-occurring population of clients within the human service center.

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Session Eight



Post-Traumatic Stress in a Post 9/11 World

1.0 CEU

Summer Hanson LCSW, MSW | Clinical Social Worker & Program Manager-Fargo VA HCS

Trauma is a fact of life and to a varying degree, has an effect on us all. We will discuss the signs and symptoms and treatment modalities related to Post-traumatic Stress, to include holistic health approaches. Barriers to healing will be presented, as well as success stories leading to Post-Traumatic Growth. New perspectives in the field will be discussed. We are all in this together and know that healing journeys take many different paths.

Upon completion learners will:

- Become familiar with PTSD symptoms
- Gain awareness of Evidenced Based treatment modalities for PTSD
- Understand holistic health approaches to reduce PTSD symptoms

Summer Hanson

Summer is the Post 9/11 Transition and Care Program Manager for the Fargo VA HCS. Summer provides outreach, supportive therapy, and case management services to transitioning Veterans who served after 9/11. She is trained in Cognitive Processing Therapy for PTSD, and Acceptance and Commitment Therapy modalities. Summer has worked in and around the MH field since 1998, initially for the Department of Corrections, followed by the ND State Hospital. After completing graduate school, she has worked as Family Therapist and Family Group Decision Making Conference Facilitator. She has been employed by the Fargo VA HCS since 2009, providing individual and group therapy in the Mental Health Clinic, prior to her current position. In her spare time she enjoys researching complementary medicine and holistic approaches to health and well-being.

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Session Nine



Co-occurring Disorders & Cross Addiction

1.0 CEU

Tanya Frieze, MSW, LICSW, MN-CGC, LADC | Manager of Holistic Treatment Services-Project Turnabout

Lyndsie Voorhees, MA, LPCC, MN-CGC | Mental Health and Family Supervisor-Project Turnabout

Many people suffer from both addiction and a mental health disorder. Addictions tend to cross trade one addiction for another. In this session we will discuss Co-Occurring Disorders and how they impact the clients we serve. In this session, treatment models will be provided as well as an understanding of treatment pathways for co-occurring disorders. This session will conclude with a discussion on cross addictions; why they develop, errors in thinking about them, and the impact they have on the people we serve.

Learning Objectives:

- Develop an understanding of the overlap between active addiction symptoms and psychiatric disorders
- Identify treatment models for co-occurring disorders and gambling treatment
- Develop an understanding of treatment pathways and best practices

Tanya Frieze

Tanya is the Manager of Holistic Treatment Services at Project Turnabout Centers for Addiction Recovery. She has experience of working with families impacted by gambling and chemical addiction. Tanya also brings a family perspective from her own life to this session.

Lyndsie Voorhees

Lyndsie is a Mental Health and Family Supervisor at Project Turnabout Centers for Addiction Recovery. She has experience working with children and adults with mental health disorders and addictions. She started her journey at Project Turnabout working with compulsive gamblers before joining the mental health and family team. Her experiences help her provide education and insight to family members and patients.

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Session Ten



Multisystemic Therapy: Going Beyond Individual Therapy for Youth Psychiatric Illness & Substance Use

1.0 CEU

Emily Althoff LPCC, LMAC | MST Unit Supervisor-Southeast Human Services

Multisystemic Therapy (MST) is an intense family and community-based program that works to reduce the risk of youth out-of-home placement. MST was originally created for juvenile justice populations and has a large body of research supporting it. At Southeast Human Service Center in Fargo, we provide MST-Psychiatric. This means that we not only work with juvenile justice populations but also with youth who have significant psychiatric concerns. Therapists carry an average caseload of four families with the addition of a Psychiatrist (.2FTE) and a Crisis Case Worker. The team provides 24-7 crisis coverage to prevent the need for high levels of care (hospitalization, police intervention, etc.). We have a unique method of conceptualizing adolescent mental illness and substance use and look at how the entire system (family, peers, schools, community, etc.) impacts these domains of a child's life. Yes, we do work with the child individually, but we try to always go beyond that. Through this structure, we are better able to have a more lasting impact on our kids and their families too. We have had great outcomes in Fargo with 100% of our kids remaining in the home, spending increased time in school, and seeing a reduction in arrests (at treatment closing). For programming information and national data, please visit www.mstservices.com.

Upon completion learners will:

- Develop an understanding of Multisystemic Therapy and how it is provided in Fargo
- Identify how ecological context contributes to adolescent substance use and psychiatric illness
- Identify interventions based on ecological assessment

Emily Althoff

Emily currently holds Licensed Professional Clinical Counselor and Licensed Masters Addiction Counselor licenses in North Dakota. She graduated from NDSU with a B.S. in Psychology and has two Masters degrees from the University of Mary's, an M.S. in Counseling and Master of Public Administration. She has a strong background in providing evidence-based programming and currently supervises the only MST team in North Dakota. Additionally, she is rostered in North Dakota for Trauma-Focused Cognitive Behavioral Therapy. Emily has worked with a diverse array of clients in both the office and the community, but has found her niche in home and community-based therapies. She loves the real-life experiences from working with clients in their most comfortable settings.

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Session Eleven



Medical Ethics & Professional Boundaries

1.0 Ethics CEU

Stephanie Stewart | Operations Administrator-Mayo Clinic Health System

As medicine continues to advance, practices must continue to be aware of the issues related to medical ethics and professional boundaries. It is not uncommon for individuals to feel that their healthcare providers are family and begin to act as such. This can be helpful and it can also be harmful if there is not a continued effort to remain in the zone of helpfulness.

Upon completion learners will:

- Be able to discuss the difference between a deontological and a utilitarian view of ethics
- Understand how maintaining professional boundaries can assist with ethical decision making
- Be able to discuss ethical issues with patients and their family members when discord is present

Stephanie Stewart

Stephanie graduated from Washington University in St. Louis with her MSW in 2001. She began as a dialysis social worker that same year with six units in three states and 28 hours a week to do her work. In 2004, she enrolled in an MBA in Health Care program at the University of St. Thomas and graduated in 2006. By the time she left dialysis for kidney transplant in 2005, she was at 40 hours per week with five units in just two states and leadership was in the process of hiring another 1.0 FTE to share the workload. Stephanie has been the Regional Director for Social Services within the Mayo Clinic Health System where she assisted in reducing demands placed on the dialysis social worker within her department. She is currently an Operations Administrator supporting Emergency Medicine within SWMN and a Board Member for the National Kidney Foundation.

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Session Twelve



Stage Wise Treatment & Interventions for Co-occurring Disorders

2.5 CEUs

Kristi Rhen | Behavioral Health Services Administrator-Southeast Human Services

This session will explore Stage Wise Treatments and Intervention based on the work of Prochaska and DiClemente's Transtheoretical Model in behavioral health. The stages of change will be defined and explored along with the various stages of treatment and intervention. The importance of implementing the appropriate treatment/intervention for that stage of change will be examined. Participants will leave the session with an understanding of the value this type of model has in working with clients.

Upon completion learners will:

- Identity stages of change
- Understand each stage and relevant methods of treatment
- Align and connect treatment interventions with the stages of change

Kristi Rhen

Kristi graduated from Concordia College with a bachelor's degree in Sociology and Psychology. She has worked at Southeast Human Services since 2001 and has been a case manager, Team Lead, and Administrator at the organization. Kristi has well-rounded experience on the treatment and service aspects of behavioral health. A large part of her work has been dedicated to treatment and services for individuals struggling with co-occurring disorders. She has worked exclusively with the Integrated Dual Disorders Treatment Team and facilitated Integrated Dual Disorder Treatment training at Southeast Human Services. Additionally, she provides training for staff on working with electronic health records, and is currently developing cultural competence training. Kristi values the idea that we never fully "arrive" at mastering knowledge, skills and attitudes.

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Session Thirteen



The Impact of Early Trauma & Strategies That Bring Forth Hope & Healing

1.0 CEU

Sara Barber MA, LPCC | Clinician-Bethany Christian Services

The impact of early trauma on the developing brain can be profound. This includes exposure to domestic violence, abuse, neglect, parental incarceration, and parental drug use, as well as prenatal exposure. Join us as we look into the impact of early trauma on the brain, behavior and mood regulation, as well as explore strategies that have been proven to incite hope and healing.

Upon completion learners will:

- Identify specific areas of impact when early trauma occurs
- Understand and identify several trauma-informed parenting strategies and clinical approaches

Sara Barber

Sara Barber has experience with foster care and adoption in both professional and personal capacities, having worked with foster families/post-adoptive families for several years, as well as adopted three children of her own. Her personal and professional experience has given her a rich understanding of some of the difficult situations foster/adoptive families and children face, along with knowledge of strategies and tools that incite hope and healing.

Sara graduated from Concordia College, Moorhead, MN, with a B.A. in Psychology and from Denver Seminary, Littleton, CO, with a Master of Arts degree in Counseling. She has advanced training and certification in Trauma Focused Cognitive Behavioral Therapy (TFCBT) and ADOPTS (Addressing Post-Trauma's Stress in Adoptive Children). Sara has also gained additional certification through the Center for Advanced Studies in Child Welfare: Permanency & Adoption Certificate Program through the University of Minnesota.