



pcbConference



April 22-23, 2024
Harrisburg, PA



PCB is excited to host its 23rd Annual Conference in Harrisburg, PA.

Please join us for up to 10.5 hours of education, and networking with fellow professionals and organizations.

Conference registration fee includes two continental breakfasts and one lunch.

where

Hilton Harrisburg

when

April 22-23, 2024

education hours

10.5 hours for full conference attendance

registration fee

\$200 Prior to March 1, 2024

\$225 After March 1, 2024

schedule

MONDAY, APRIL 22

7:00am – 8:00am: Registration, Continental Breakfast, Exhibits, Networking

8:00am – 9:30am: Ethics Panel: Complaint Process & Outcomes

9:30am – 9:45am: Break, Exhibits, Networking

9:45am – 12:45pm: Morning Trainings

11:00am – 11:15am: Break, Exhibits, Networking

12:45pm – 1:45pm: Lunch

1:45pm – 4:45pm: Afternoon Trainings

3:15pm – 3:30pm: Break, Exhibits, Networking

TUESDAY, APRIL 23

7:00am – 9:00am: Continental Breakfast, Exhibits, Networking

9:00am – 12:00noon: Morning Trainings

10:45am – 11:00am: Break, Exhibits, Networking



training categories

All trainings are categorized to assist attendees to select trainings that are tailored to them to enhance their knowledge and improve their professional experience.

PEER: peer and recovery support, and community health fields specific.

CLINICAL: intermediate and advanced clinical concepts and skills.

GENERAL: broad topics that apply across workforces.

BASIC: for entry level/new professionals.

INTERMEDIATE: builds on fundamental knowledge and skills.

ADVANCED: expands on existing knowledge of a topic area, for those who have been in the field for an extended period of time.

ETHICS: training will count towards credential ethics requirement.

BEST PRACTICE: procedures that are widely accepted or promoted as being correct or most effective.

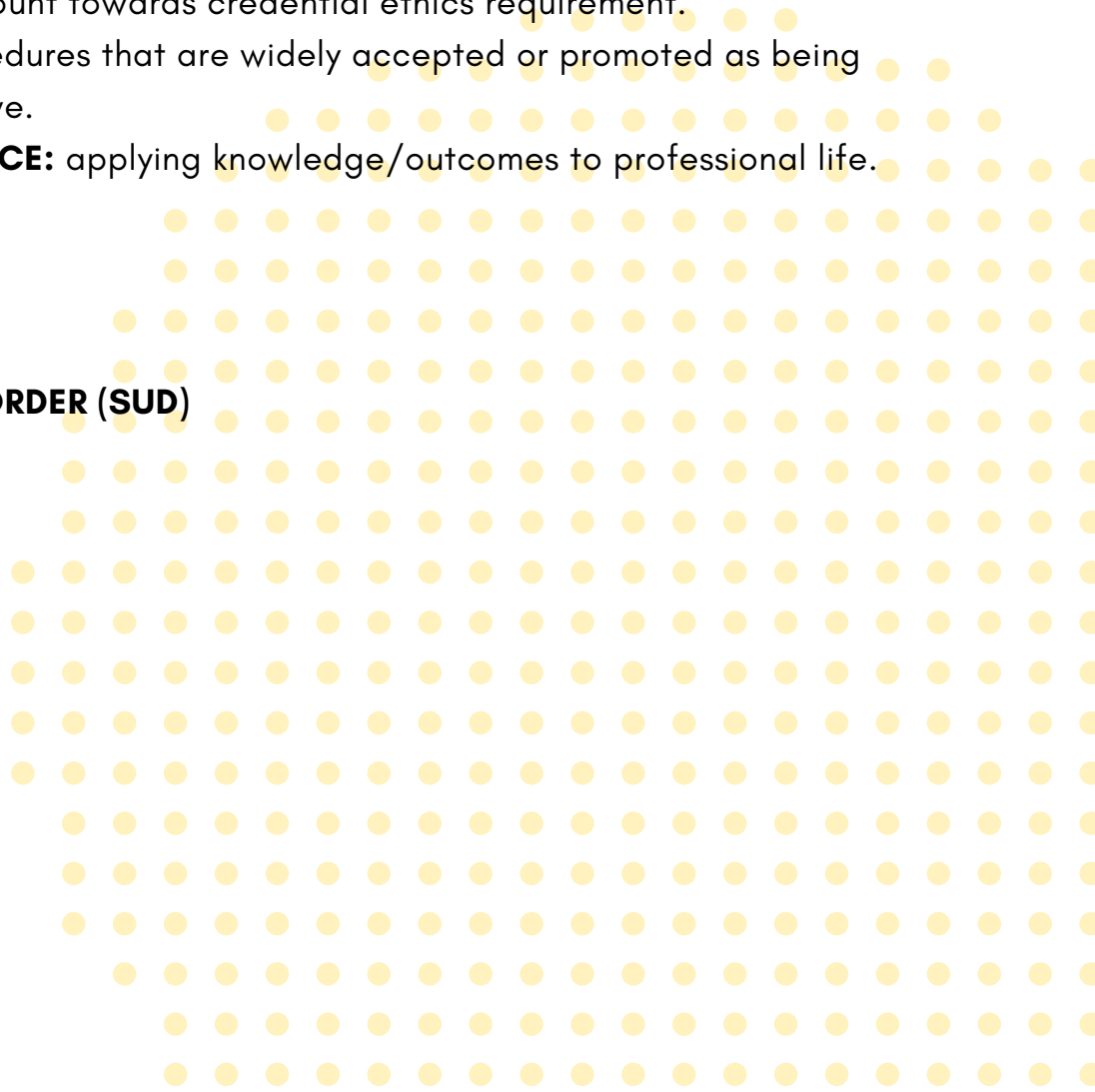
RESEARCH TO PRACTICE: applying knowledge/outcomes to professional life.

CO-OCCURRING

GAMBLING

MENTAL HEALTH (MH)

SUBSTANCE USE DISORDER (SUD)



Monday morning

April 22nd

ETHICS PANEL: COMPLAINT PROCESS & OUTCOMES

GENERAL

Panelists:

Donald Altemus, MS, CPS, CRS, CRSS, CAADC
Thomas Baier, MHS, LPC, CADC, CCS
Margaret Eckles-Ray, BA, CADC, CRS
Katrín Fieser, MSW, CRS, CFRS, CPS
Marcelle Giovannetti, Ed.D., CADC, ACS, NCC, LPC
Sandra Grottola, CADC, LSW, CCM, CCP
Theresa Murphy, MHS, CADC

Moderator: Mary Jo Mather

training objectives

- Participants will develop an understanding of ethical complaint evaluation practices.
- Participants will be able to identify elements that support board action on certification status.
- Participants will explore case study examples to practice ethical decision-making.

The PCB Ethics Committee will host a panel discussion in which participants will explore the process by which the PCB Ethics Committee approaches and determines recommendations and outcomes for ethics complaints. The panel will detail the time spent with complaints, the common elements that support or refute board action, and use case studies to examine more closely the responsibilities of committee members to evaluate complaint evidence and severity to determine outcomes in the service of public protection.

training categories

General, Basic, Intermediate, Advanced, Ethics

FIRST RESPONDERS AND THE ADDICTION CRISIS: TREATING THE HEALERS

CLINICAL

PEER

*Scott Tracy, LPC, CAADC, ACS
Shelby Brightbill, MA, LPC, CAADC
Shannon Vaught, MA, CAADC*

training objectives

- Describe the environmental factors that lead to both cumulative and critical incident stress in first responders which lead to addiction.
- Describe the cultural factors present among first responders.
- Identify the triggers for addiction development among first responders and ways to mitigate them.
- Describe evidence-based prevention and intervention strategies for clinical application in work with first responders.
- Apply an early first responder risk assessment model for addiction and PTSD.

training categories

Clinical, Peer, Intermediate, Best Practice, MH, SUD

The addiction pandemic has placed a historic burden on our Commonwealth's first responders (i.e. police, emergency medical service and fire personnel). The effects of their rescue work on the front line have exposed first responders to both cumulative and critical incident stress. Addiction disorders among first responders continue to rise and represent the psychological toll of helping. This training explores first responders as a unique cultural group, discusses the prevalence of addictive disorders, explores preventative and counseling interventional strategies that can be used to heal our state's most important helpers.



MARIJUANA AND THE CURRENT STATE OF THE UNION: LET'S GET IN THE WEEDS

CLINICAL

Eric J. Webber, MA, CADC, CCS
Eric Rodriguez, LSW, CAADC

This training will examine current trends and issues with marijuana in the state of Pennsylvania and across the country. Areas to be discussed include THC's impact on mental health issues in both children and adults, challenging arguments for medical usage, impact on impaired driving, economic implications, and treatment considerations. The training will be both didactic and interactive to encourage participant engagement.

training objectives

- Provide up-to-date information on the current impact of marijuana on society.
- Examine current impact of marijuana on mental health and physical health issues.
- Challenge arguments for the "safety" and "efficacy" of medical marijuana.
- Discuss definitions of impairment due to marijuana and impact on driver safety.
- Examine and discuss marijuana impact on various demographic groups (e.g. adolescents, adults, older adults).

training categories

Clinical, Intermediate



DIALECTICAL BEHAVIOR THERAPY SKILLS FOR CO-OCCURRING DISORDERS

CLINICAL

*Laura John, MSW, LICSW, LADC, LCSW,
ICS, CSAC
Megan Kurdi, LCSW*

training objectives

- Identify how DBT has been adapted for use in the treatment of substance use disorders.
- Utilize DBT-SUD skills in your practice when treating individuals with co-occurring disorders.
- Understand how these skills help people to build a life worth living in recovery.

training categories

Clinical, Intermediate, Advanced,
Co-Occurring, MH, SUD

Dialectical Behavior Therapy (DBT) is an effective treatment approach for treating the diagnosis of borderline personality disorder (BPD). BPD is a condition that is often characterized by behavioral patterns that include impulsivity and emotional dysregulation. Similarly, individuals with co-occurring disorders can experience these behavioral patterns and DBT skills have been adapted/translated to also meet the needs of this population. DBT-SUD is a growing approach to treating people with co-occurring conditions. Understanding how to use these skills can be vital to ensuring we are helping people to truly build a life worth living.

This training will highlight the adaptation of DBT for use with people with co-occurring disorders, the application of some specific DBT skills, and how these skills can help people to truly embrace their values and priorities in order to be successful in recovery.

SNAP OUT OF IT: EXAMINING PROCESS ADDICTION TO SOCIAL MEDIA AND INTERNET GAMING

CLINICAL

Donald Altemus, MS, CPS, CRS, CRSS, CAADC

Millions of people use social media and play video games. Currently, there is no official diagnosis for social media addiction. The American Psychological Association has listed it as a condition for further study, but compulsive social media use is recognized as a behavioral addiction and is becoming increasingly more common. Gaming disorder became a recognized diagnosis in 2019. This training will examine the developmental, social and neuroscience impacts that influence compulsive social media use and gaming disorders. Training participants will leave with information on the risks associated with specific social media platforms, diagnostic assessments to determine social media and/or gaming addiction, and interventions that can be used to treat social media and/or gaming addiction.

training objectives

- Understand the developmental, social, and neuroscience behind social media and/or gaming disorders.
- Define the criteria for social media and/or gaming disorder.
- Name clinical interventions that can be used when treating an individual with social media and/or gaming disorders.

training categories

Clinical, Intermediate, Advanced, Best Practice, Research to Practice, Co-Occurring

Monday afternoon

April 22nd

CLINICAL SUPERVISION FROM TWO PERSPECTIVES – THE RECIPIENT AND THE PROVIDER

CLINICAL

Thomas Baier, MHS, LPC, CADC, CCS

As a counselor, have you ever asked yourself: “Is this what clinical supervision is supposed to be?”. Or as a clinical supervisor, do you sometimes question your effectiveness in promoting best practices with your supervisees? This training will assist you in answering these questions as we explore the fundamental practices of meaningful, effective clinical supervision (not to be confused with administrative supervision) in the treatment of substance use disorders. As a supervisee, we’ll discuss what you might expect and some aspects of self-advocacy as a means of assuring that those you serve receive the very best that you have to offer. As a supervisor, we’ll explore those essential elements that comprise meaningful clinical supervision and the implied measurements for success for both you and your supervisees.

training objectives

- Introduction to the key elements that comprise clinical supervision in behavioral health settings.
- Discussion of methods for the determination that you are providing or receiving clinical supervision that meets minimum standards.
- Provision of recommendations and resources for both clinical supervisory providers and recipients to assure that clinical supervision might be integrated into an agency culture.
- Describe clinical supervision as distinct from administrative/managerial supervision. Verbalize several benefits specific to clinical supervision.
- Develop an action plan for either advocating for meaningful workplace clinical supervision or for the resources necessary to conduct meaningful clinical supervision.

training categories

Clinical, Intermediate, Advanced, MH, SUD

THE IMPACT OF GAMBLING DISORDER: EXPLORING PREVALENCE, COMORBIDITY, AND SUICIDALITY

CLINICAL

PEER

*Gregory Krausz, MA, CAADC, LPC
Josh Ercole, BA*

training objectives

- Discuss the growth of gambling availability and the potential impact it has on individuals, families and society.
- Outline co-occurring gambling, substance use and mental health concerns.
- Discuss the increased risk of suicidal ideation and attempts among those experiencing significant gambling problems.
- Identify populations who have an increased risk of developing gambling problems.
- Recognize the benefit of incorporating brief screening tools and assessments into existing practice in an effort to help address gambling related concerns.
- Utilize the tools and resources that are available.

training categories

Clinical, Peer, Basic, Intermediate, Gambling, MH, SUD

Today, more people have access to, and are participating in, gambling activities than ever before. While many individuals are able to gamble without developing issues, there is a percentage who are unable to maintain safe levels of play.

Unfortunately for these individuals, this often progresses to a point where several areas of their lives are impacted in a negative way.

This training will review definitions of gambling, problem gambling, and the bio-psycho-social-spiritual impacts that gambling may have on an individual. Common co-occurring concerns will be explored including substance use, mental health, and the significantly increased risk of suicide among individuals experiencing gambling disorder. The training will focus on those who are at an increased risk of developing a gambling issue and discussion will include screening and intervention strategies that can be utilized to address problem gambling concerns and suicidal ideations among clients.

EVALUATION AND PRACTICE: EMBEDDING CURIOSITY AND SKEPTICISM TO REDUCE PUBLIC HARMS

CLINICAL

Martha Thompson, PsyD, CAADC

The counseling field evolves and incorporates new treatment methods at regular intervals. Evidence based and informed methods have been adopted in many clinical strategies. This can generate mixed results in practice, giving credence to the importance of understanding the limitations of approaches on individuals and the necessity of proper training and application practice when used. There are some approaches to care that are promoted through public health agencies and other popular social networks that have taken root among practitioners and organizations that are not adequately researched or focused on individual outcomes. It is not uncommon for the promise of a practice or approach to be adopted simply due to its “novel” nature or promotion by “authorities” who have a stake in its use. A skeptical and curious counselor will assess treatment strategies through a variety of methods that hold the client’s needs and progress at the center of that equation. This training will explore some of these trends and identify how to practice embedding curiosity and skepticism to ensure better practice and reduce potential harms across the populations served.

training objectives

- Explore how to recognize methods that are not working or are not fit for purpose with individual clients.
- Identify treatment elements that contribute to the inability to assess efficacy.
- Identify and practice strategies informed by skepticism and curiosity, particularly when confronted with promoted practices that are “new” and/or “promising”.
- Discuss ways to hold compassionate yet direct conversations if we find ourselves working in places that advance cookie cutter approaches.
- Explore our limitations to impact individual behavior and the notion we cannot help everyone.

training categories

Clinical, Intermediate, Ethics, MH, SUD

THE IMPACT OF SUBSTANCE USE DISORDER ON PARENTING AND CHILDREN

PEER

Beth Bitler, MSA, CAAP, CFRS

training objectives

- Demonstrate understanding of at least three ways that parenting behavior is affected by SUD.
- Identify at least three strategies for helping families with parental SUD.
- Understand the needs of parents of minor children who are engaged in treatment and early recovery.
- The effects of a variety of substances on behavior of parents and risks for children living with parents in active addiction.
- The way children understand substance use is influenced not only by the age of the child but by their interactions with caring adults, both inside and outside of the child's family.
- How children may experience a "trauma of recovery" when parents enter treatment, and how children react to a newly sober parent.

This training will provide information on how Substance Use Disorder (SUD) affects parenting behavior and children – both in times of active use and in recovery. We will also examine strategies for providing safety to children in homes with parental SUD, as well as support for parents and caregivers of children while in treatment and early recovery.

training categories

Peer, Basic, Intermediate, MH, SUD



tuesday
April 23rd

UNVEILING THE UNSPOKEN: NAVIGATING THE SHADOWS OF ALCOHOL USE DISORDER

CLINICAL

PEER

Samantha L. Osterlof, MS, CRS, CAADC

Unveiling the unspoken is a training that will prioritize the ubiquitous nature of alcoholism in our society and its impacts across the domains of individuals, families, communities, and treatment concerns. Though alcohol remains a primary substance of abuse, and has measurable harms in the lives of many, it has far less relevance in today's health and treatment focus. This lack of attention results in limiting treatment dollars that are determined necessary to assist those who suffer from alcoholism's effects. Exploring the reasons for this change in focus is central to the goals of this training. Identifying elements that contribute to the development and risk factors of alcohol use disorder (AUD) and patterns that contribute to the complexity of its treatment will also be discussed. We will examine and discuss the evidence-based intervention techniques that assist in recovery for the individual and family seeking support and intervention and how re-prioritizing alcoholism should be central to the mission of treatment.

training objectives

- Focus on AUD risk factors and domains of impact
- Explore best practice treatment and recovery practice
- Examine and discuss factors that diminish prioritizing treatment and recovery practices for AUD.

training categories

Clinical, Peer, Basic, Intermediate, Best Practices, SUD

THE NUTS 'N BOLTS OF THE ETHICS COMMITTEE PROCESS FOR DECISION-MAKING

GENERAL

Thomas Baier, MHS, LPC, CADC, CCS

training objectives

- Articulate the criteria for a valid ethics complaint.
- Explain the key elements utilized in the ethics decision-making process.
- Verbalize how the ethics process relates to the core mission of PCB.
- Readily utilize the PCB Code of Ethics as supporting documentation in the ethics decision-making process.

training categories

General, Intermediate, Advanced, Ethics, MH, SUD

This training builds upon the conference opening panel discussion regarding the ethics process subsequent to a formal ethics complaint. As such, we will replicate the ethics case review process through a series of role plays wherein you, the participants, get to be the decision-makers in the final determination as to the worthiness of the complaint as well as any appropriate sanctions to be imposed upon the certified individual in question. We'll use a series of case examples, both straight-forward and a few with some complex nuances, as a means of providing participants with the experience of thinking through the review and decision-making process. So brush up on your ethics code and bring your thinking cap to what promises to be an intense thought-provoking three hours. This training can be used as fulfillment of requirements for ongoing ethics training.

XYLAZINE: THE NEW DRUG ADDITIVE

GENERAL

Sarah Laurel

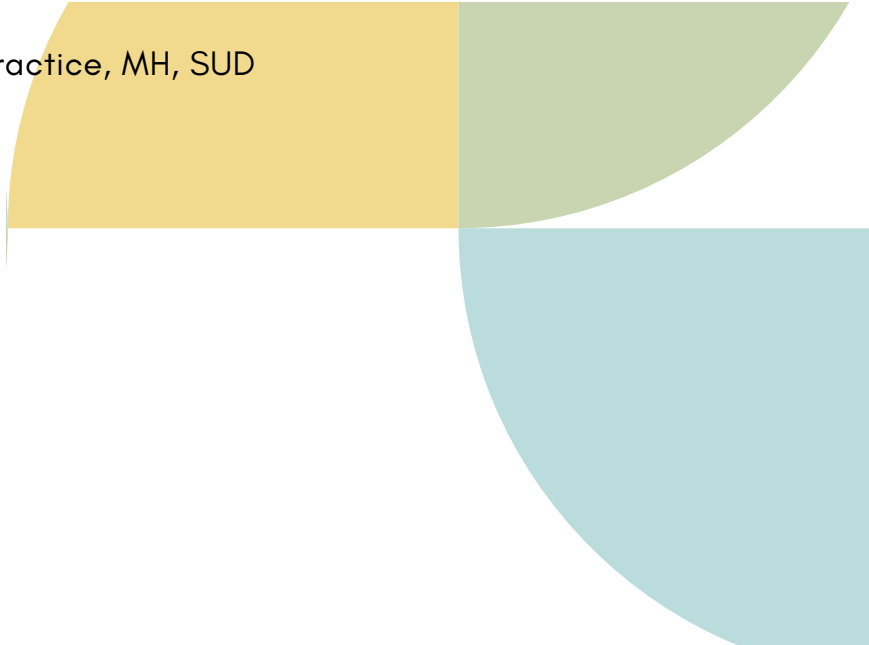
This training will provide a comprehensive understanding of harm reduction strategies, public health issues, current drug trends, wound care related to xylazine use, fentanyl test strips, updated withdrawal protocols, and updated overdose reversal techniques, given the proliferation of xylazine within the illicit drug supply. We will discuss stresses the importance of knowing how to interact with people currently using drugs or experiencing homelessness and providing basic public health needs to combat the public crisis we are experiencing. This training aims to equip participants with practical knowledge and resources to address the challenges posed by xylazine use in a thorough and compassionate manner.

training objectives

- Identify xylazine trends in PA & national drug supply.
- Describe xylazine's impact/harm to the human body, the community, and public health overall.
- Identify proactive ways to respond/treat street-level during active use & acute withdrawal management.
- Discuss history and legality of fentanyl test strips.

training categories

General, Best Practice, Research to Practice, MH, SUD



SOCIOMETRICS & RELATIONAL TRAUMA REPAIR (RTR)

CLINICAL

*David F Moran CADC, LCSW, TEP
Karen Levin Moser LCSW, PAT*

training objectives

- Explore and practice resilience timelines.
- Group members will learn through personal experiential RTR tool practice, including practice with the use of Social Atom (Eco Map) to assess dysfunction, isolation, and available social networks.

training categories

Clinical, Intermediate, Advanced, SUD

Sociometrics: Relational Trauma Repair (RTR) utilizes the Human Social Engagement System. This training will describe and practice the embedded tools within RTR that assist in the creation of connection, safety, and the camaraderie essential in strengthening recovery and healing.

Relapse prevention includes the ability to identify, regulate and process feelings. Relational Trauma Recovery develops an atmosphere that is conducive to healing from trauma and addiction by connecting group members.

We can be hurt in relationships, but we also heal in relationships. Relational Trauma Repair is a bottom up (Feelings Centered) approach to connecting group members with one another before incorporating specific cognitive process tools and resources.



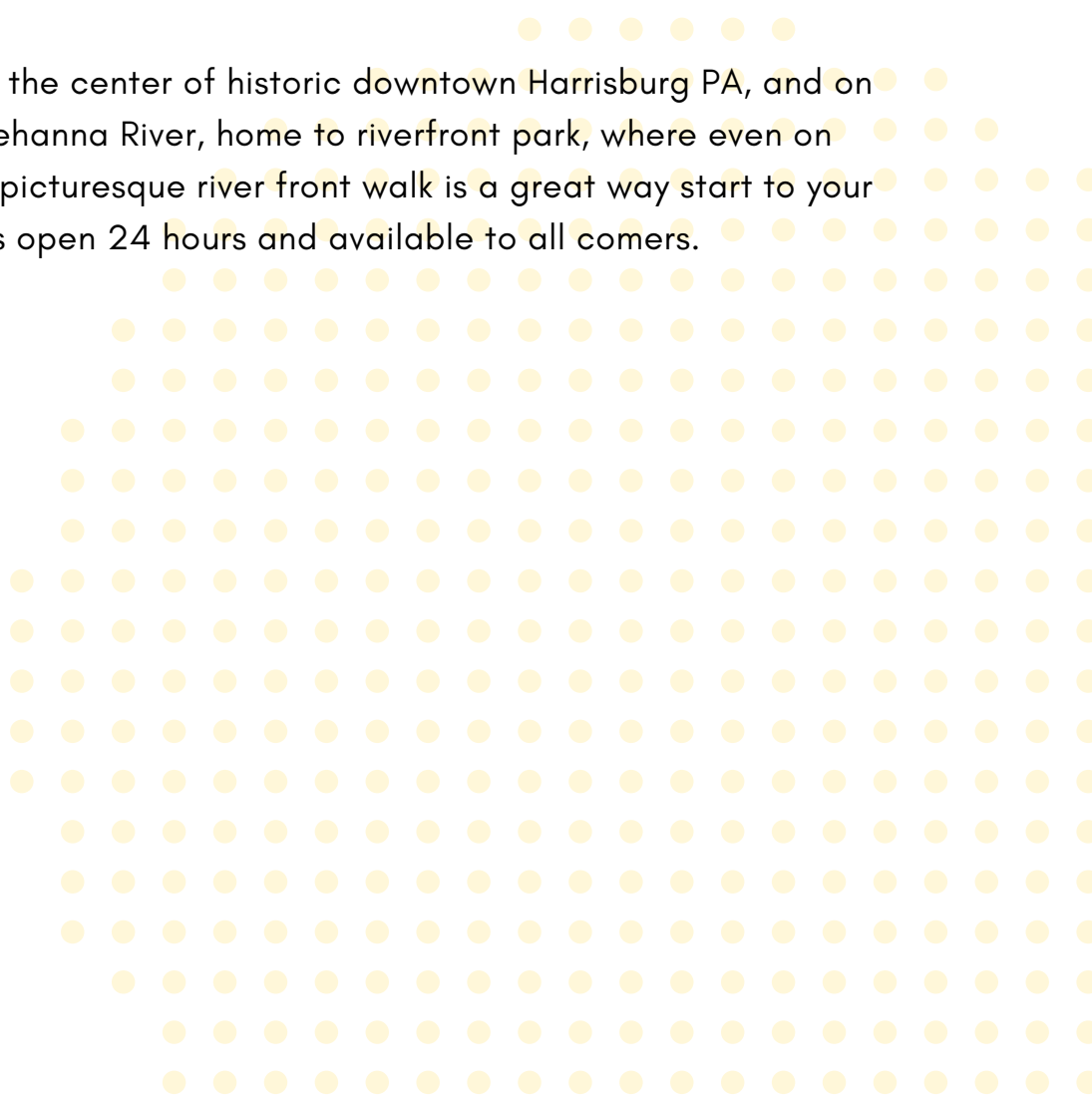
hotel information

A block of rooms has been reserved at the Hilton Harrisburg at a special conference rate of \$146 for a standard room per night. Several small suites are also available at a higher and also discounted rate. Room rate includes complimentary self-parking in the Walnut Street Parking Garage attached to the Hilton Harrisburg.

Reservations should be made by contacting the Hilton Harrisburg at (717) 233-6000. Please indicate group code: CERBD when calling to receive the conference rate or [click here for online reservations](#).

Room reservations must be completed by April 1, 2024, to receive these special rates.

The Hilton, is located in the center of historic downtown Harrisburg PA, and on the banks of the Susquehanna River, home to riverfront park, where even on those chilly mornings a picturesque river front walk is a great way start to your day! And best of all it is open 24 hours and available to all comers.

A decorative graphic consisting of a grid of small yellow dots, arranged in a pattern that tapers to the right, located in the bottom right quadrant of the page.

registration

SPACE IS LIMITED. It is recommended to register via PCB's secure, on-demand online conference registration at www.pacertboard.org/conference

NAME: _____

EMAIL: _____

ADDRESS: _____

CITY, STATE, ZIP: _____

CELL PHONE: _____

PAYMENT

Payment must accompany the registration form. Registrations will not be processed without payment.

\$200 - Prior to March 1, 2024

\$225 - After March 1, 2024

- Personal Check Organization Check Money Order VISA MasterCard
 Discover American Express

Checks & Money Orders made payable to PCB.

CARD NUMBER: _____

EXPIRATION DATE: _____ SECURITY CODE: _____

NAME ON CARD: _____

BILLING ADDRESS: _____

Return form to PCB at info@pacertboard.org or mail to PCB, 298 S. Progress Avenue, Harrisburg, PA 17109

Registration is on a first-come, first-served basis. Mailed forms require longer processing time and it does not guarantee your attendance at the conference.

CANCELLATIONS/REFUNDS/CHANGES: Written refund requests, acceptable up to 10 working days prior to the conference are subject to a \$25 administrative fee. Written substitute attendee requests, acceptable up to 10 days prior to the conference, are subject to a \$25 administrative fee. Payments on or after the conference date are subject to a \$25 administrative fee.

training selections

NAME: _____

EMAIL: _____

MONDAY MORNING

___ Ethics Panel: Complaint Process & Outcomes

CHOOSE ONE

___ SNAP Out of it: Examining Process Addiction to Social Media and Internet Gaming

___ First Responders and the Addiction Crisis: Treating the Healers

___ Marijuana and the Current State of the Union: Let's Get in the Weeds

___ Dialectical Behavior Therapy Skills for Co-Occurring Disorders

MONDAY AFTERNOON

CHOOSE ONE

___ Clinical Supervision from Two Perspectives - the Recipient and the Provider

___ The Impact of Gambling Disorder: Exploring Prevalence, Comorbidity, and Suicidality

___ Evaluation and Practice: Embedding Curiosity and Skepticism to Reduce Public Harms

___ The Impact of SUD on Parenting and Children

TUESDAY MORNING

CHOOSE ONE

___ Unveiling the Unspoken: Navigating the Shadows of Alcohol Use Disorder

___ The Nuts 'N Bolts of the Ethics Committee Process for Decision-Making

___ Xylazine: The New Drug Additive

___ Sociometrics & Relationship Trauma Repair (RTR)