# 2024 Calendar of Training ASAC

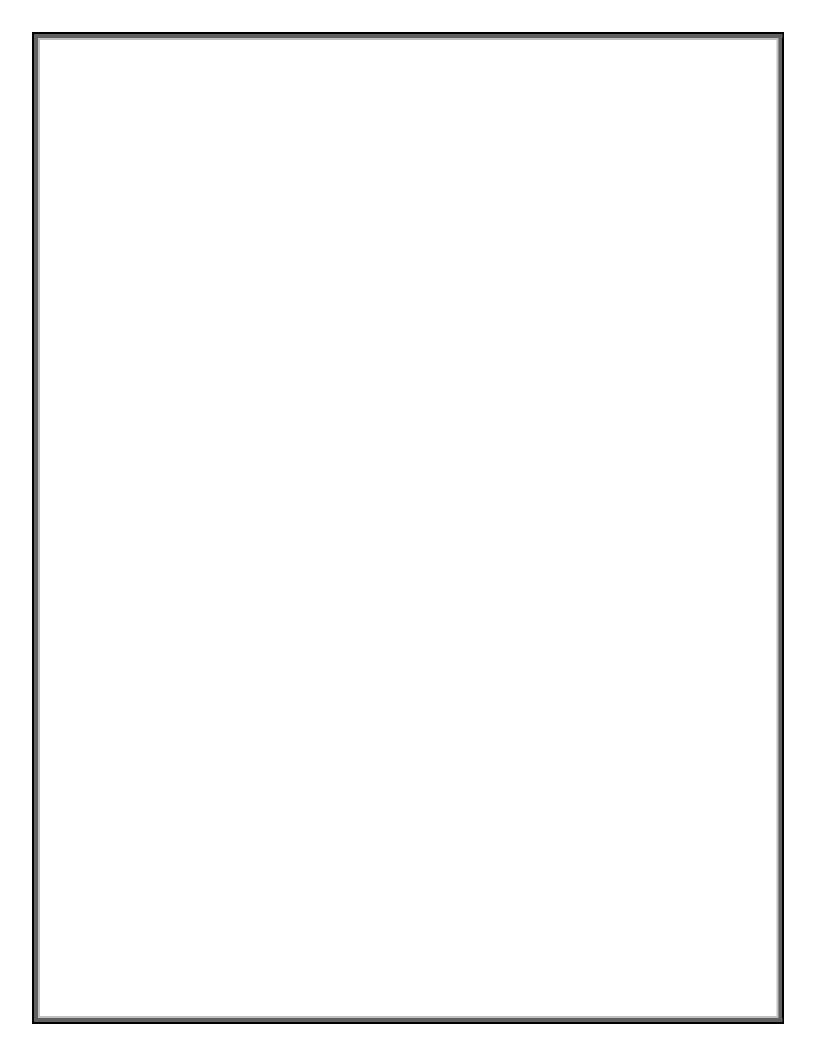
**Appalachian Substance Abuse Council** 

www.gibsontrainingcenter.org

864-467-3065

NAADAC #138776

SC LPC, LMFT #4529



This document lists all scheduled monthly Region 1 trainings for 2024. Additional *fee-based* trainings will be offered throughout the year.

For a current list of additional trainings please visit our website: <u>www.gibsontrainingcenter.org</u>

For additional information please contact Stephanie Bentley at: <u>sbentley@phoenixcenter.org</u>

or 864.467.3065

## TABLE OF CONTENTS

Information and Registration	Page 3
Topics	Page 4
Training Descriptions	Pages 5-21
Trainer Bio's	Pages 22-24

## **INFORMATION AND REGISTRATION** for all scheduled 2024 Region 1 Trainings:

How many:	Trainings are restricted to 30 attendees unless otherwise noted. Registration is first come/first served.	
Where:	Trainings are in person or on Zoom. Check training website for updated information. ( <u>www.gibsontrainingcenter.org</u> )	
Time:	9:00 to 4:30 PM	
	(In-person training extended to 4:30PM to allow an hour lunch)	
Credit:	NAADAC/LMFT/LPC/SW Approved	
Audience:	Private Practitioners, Counselors, Social Workers, Medical Professionals and Prevention Specialists	
Fee:	Registration is \$75.00 per 6 CEU day	
	Employees of Region 1 301 Agencies (A/OBHS, BHSPC, CCCADA, The Forrester Center, HealthyU, Phoenix Center, Cornerstone, Westview, Gateway, ReGenesis, plus Spartanburg Area Mental Health Center and Anderson/Oconee/Pickens Mental Health Center) may attend monthly Region 1 trainings at no charge; however, registration is needed in advance and is on a first come/first served basis.	
Registration	: www.gibsontrainingcenter.org	
Contact:	Stephanie Bentley: sbentley@phoenixcenter.org or 864.467.3065	

## 2024 DATES TOPIC

January 26	Medicaid Documentation (In Person)	<u>5</u>
February 23	Groups 101 (In Person)	<u>6</u>
March 22	Ethics (Zoom)	Z
April 26	Grief and Loss (In Person)	<u>8</u>
May 24	Tension and Trauma Reducing Exercises (In Person)	<u>9</u>
June 28	CBT in Groups (In Person)	<u>10</u>
July 26	Play Therapy (In Person)	<u>11</u>
August 23	Trauma Informed Suicide Prevention (In Person)	<u>12</u>
September 13	ACES Training (Zoom)	<u>13-14</u>
October 25	Ethics (In Person)	<u>15</u>
November 22	Advanced Groups (In Person)	<u>16</u>
December 13	Drug Screening and Interpretation (Zoom)	<u>17-20</u>
	Trainers' Biographies	<u>22-24</u>

PAGE

## **MEDICAID DOCUMENTATION**

When: January 26, 2024

Presenter: Margaret Garrett, LPC/S, LAC, AADC

### **Description:**

\*\*\* This training is scheduled to take place in person. The location is 975 Foot Hills Rd Greenville at the Charles E. Shipman Center. \*\*\*

This training will allow participants to gain a better understanding of service provision and documentation of rehabilitative behavioral health services within a Medicaid framework. Participants will be able to assess for medical necessity, create a treatment plan to meet the identified needs, and provide and document services tailored to meet the beneficiary's needs.

## **Objectives:**

- 1. Understand how to establish medical necessity
- 2. Learn how to create a treatment plan based on medically necessary needs

3. Understand the array of clinical services in the RBHS manual and provision of services

## **GROUPS 101**

## When:February 23, 2024Presenter:Charissa Wolford, LISW-CP, LAC, CS, MAC

## **Description:**

\*\*\* This training is scheduled to take place in person. The location is 975 Foot Hills Rd Greenville at the Charles E. Shipman Center. \*\*\*

While groups can often be full of complexities, it is helpful to focus on maintaining basic group best practices. This training will provide participants an overview of various types of groups and discuss the similarities and differences between each. This training will provide understanding of group fundamentals, and also provide opportunity to discuss various ways to overcome common group challenges. This training will also include role play opportunities and an introduction of potential ways to include experimental activities into groups.

- 1. Gain an understanding of the various types of groups and fundamental basics of each type.
- 2. Gain insight into helpful techniques and interventions to utilize for groups.
- 3. Develop a deeper understanding of good best practices for groups.
- 4. Discuss common group challenges and helpful techniques to overcome them.

## **GOT ETHICS?**

When: March 22, 2024

Presenter: Alan Lyme, LISW, CS

## Description: This training is on Zoom

The substance abuse and behavioral health field are fraught with ethical dilemmas. Navigating boundaries, deciding when and if to break confidentiality, and clinician selfcare are just some of those dilemmas. Lines are often blurred between legal, ethical, and moral influences as we make in-the-moment decisions that can ripple out to create major unforeseen effect. This six-hour training will focus on some of the most common ethical digressions, reinforcing the importance of adhering to agreed-upon standards and the responsibility of maintaining ethical competence.

- 1. Describe the core concepts of ethics in the substance abuse and behavioral health fields.
- Determine how the Codes of Ethics applies to boundary setting in clinical practice.
- 3. Analyze ethical dilemmas clinicians face surrounding boundary setting with respect to utilizing technology with clients in clinical practice
- 4. Develop clear ethical guidelines to address the potential for a dual relationship with a client in a clinical setting.
- 5. Identify the five main perspectives of an ethical decision-making model to help you in clinical practice.
- 6. Describe their own strengths and limitations in ethical dilemmas.

## **GRIEF AND LOSS**

## When: April 26, 2024

## Presenter: Antoinette "Toni" Sanders MSW, LISW

## **Description:**

\*\*\*This training is scheduled to take place in person. The location is 975 Foot Hills Rd. Greenville, SC 29617 at the Charles E. Shipman Center \*\*\*

The only prerequisite for grief is loss and grief is nature's way of healing broken hearts. Grief makes us uncomfortable and leaves us tripping over our words or avoiding grievers altogether. Grief comes in various forms and affects every part of our existence. The training on grief and loss will explore various types of losses and grief responses to include healthy and helpful strategies to "move with" grief in an effort to integrate the loss into everyday life.

- 1. Participants will be able to identify and define 5 different types of grief
- 2. Participants will be able to identify signs and symptoms of grief (physical, emotional, social, spiritual, and mental)
- 3. Participants will be able to effectively implement 3 coping strategies when working with grieving clients

## **TENSION AND TRAUMA REDUCING EXERCISES**

#### When: May 24, 2024

### Presenter: Helen Yonts, AADC, NCAC-II, LAC, LBSW

**Description:** \*\*\*This training is scheduled to take place in person. The location is 1400 Cleveland Street, Greenville SC 29607 at the Phoenix Center Kennedy Room. \*\*\*

TRE® is an innovative series of exercises that assist the body in releasing deep muscular patterns of stress, tension and trauma. The exercises safely activate a natural reflex mechanism of shaking or vibrating that releases muscular tension, calming down the nervous system. When this muscular shaking/vibrating mechanism is activated in a safe and controlled environment, the body is encouraged to return back to a state of balance.

Tension & Trauma Releasing Exercises (or TRE®) is based on the fundamental idea, backed by research, that stress, tension and trauma is both psychological and physical. TRE®'s reflexive muscle vibrations generally feel pleasant and soothing. After doing TRE®, many people report feelings of peace and well-being. TRE® has helped many thousands of people globally.

TRE® is designed to be a self-help tool that, once learned, can be used independently as needed throughout one's life, thereby continuously supporting and promoting personal health and wellness.

- 1. Participants will learn about the history of TRE®, how they can become certified in TRE®, and how this can be a useful tool for patients who have experienced trauma.
- 2. Participants will learn the 7 exercises of TRE®.
- Participants will have a TRE® experiential session. (Yoga mats, exercise clothing or clothing you can move your body in, and a small pillow is recommended).

## CBT IN GROUPS - Basic Structure And Components of Psychoed Group

When: June 28, 2024

## Presenter: Theresa Wheeler, MS, LPC/S, LAC/S, MAC, CS

## **Description:**

\*\*\*This training is scheduled to take place in person. The location is 975 Foot Hills Rd.

Greenville, SC 29617 at the Charles E. Shipman Center \*\*\*

A practical training on the use of Cognitive Behavioral Therapy (CBT) in groups. Helping clinicians move past the handouts that are commonly associated with the use of CBT and delve deeper into the Therapy side of CBT. Learning about session structure, group management, clinical applications, and limitations of CBT. Gaining insight into how Motivational Interviewing is woven into CBT. Learning about how thoughts / feelings / behavior are connected and how addressing thoughts creates change in feelings and behavior. Helping clinicians to see past behavior and delve into the meaning behind behavior.

- 1. Describe CBT group structure and management of groups.
- 2. Identify how thoughts, feelings, and behavior interact and can create change.
- 3. Demonstrate integration of Motivational Interviewing principles woven into CBT.
- 4. Address common stumbling blocks / challenges to use of CBT.
- 5. Conceptualize a case through a CBT framework.

## CHILD CENTERED PLAY THERAPY (CCPT) BASICS AND HEALING TRAUMA

When: July 26, 2024

## Presenter: Dr. Jennifer Geddes Hall, LPC/S, RPT

## **Description:**

\*\*\* This training is scheduled to take place in person. The location is 975 Foot Hills Rd Greenville at the Charles E. Shipman Center. \*\*\*

Children typically struggle to bridge the gap between concrete experience and abstract thought. Additionally, trauma impacts the brain in ways that inhibit cognitive processes and behavior. Play therapy helps children process these abstract experiences through concrete means (Landreth et al., 2009; Ray, 2004; Ray, 2005). Materials and toys are therefore used to directly or symbolically play out emotions, thoughts, or experiences that occur in their concrete and active world. Play provides an opportunity for the counselor to enter the world of children and for children to communicate at their level of understanding (Landreth et al., 2009). Play therapy has also been proven to be a statistically effective means of treating externalizing and internalizing problems in children regardless of setting, diagnosis, and cultural background (Bratton, et. al, 2005; Ray, 2011). This presentation will review these concepts and allow participants to practice basic CCPT skills.

- 1. Participants will be able to describe research, rationale, and theoretical base for using child centered play therapy (CCPT)
- 2. Participants will be able to identify the effects ACEs/trauma have on child behavior and the brain and how CCPT can help heal from trauma.
- Participants will be able to describe the essential skills of child-centered play therapy (CCPT) as well as applications to their setting.

## SC COMMUNITIES OF CARE TRAUMA INFORMED SUICIDE PREVENTION

When: August 23, 2024

Presenter: Maranda Beaver, LMSW

## **Description:**

\*\*\* This training is scheduled to take place in person. The location is 975 Foot Hills Rd Greenville at the Charles E. Shipman Center. \*\*\*

This training is designed for community members to learn how to support adults who may have been impacted by trauma in their lifetime or may be struggling with suicidal thinking. The training will teach participants how to be more trauma-informed in their interactions within their role in the community. The training will teach participants recognize the warning signs of suicide risk in adults, skills to ask about suicide, and strategies to support a person who is at risk for suicide or impacted by trauma. The training is designed for community members who work with or interact frequently with adults who may be at risk for suicide or coping with traumatic experiences.

- 1. Understand the links between trauma and suicide
- 2. Identify and respond to suicide risk
- 3. Support a person who might be struggling

## ACES

When: September 13, 2024

Presenter: Jill McHugh, LISW-CP

Description: \*\*\* This training is on Zoom\*\*\*

1. Objective: Participants will know and be able to clearly articulate the ACEs research findings and their strengths, weaknesses, and implications. Participants will gain a comprehensive understanding of the Adverse Childhood Experiences (ACEs) research, including its methodology, key findings, and limitations. They will be equipped to articulate the strengths and weaknesses of the research, fostering a nuanced perspective. Furthermore, participants will explore the real-world implications of ACEs research in various professional and personal contexts, allowing for informed discussions and application in their respective fields.

2. Objective: Participants will know and be able to articulate clearly basic information about how ACEs impact brain development and function as an adaptive response to environmental circumstances. Participants will delve into the intricate relationship between ACEs and brain development. They will acquire a foundational understanding of how adverse experiences during childhood can shape neural pathways and influence cognitive and emotional functions. The training will empower participants to clearly communicate these concepts, recognizing the adaptive nature of these responses in the context of environmental stressors. This knowledge will enable participants to approach trauma with a more empathetic and informed perspective in their professional roles.

3. Objective: Participants will know and be able to articulate clearly what community resilience is and how the development of community resilience can help reduce ACEs in children. Participants will explore the concept of community resilience and its role in mitigating the impact of ACEs on children. The training will provide participants with a clear understanding of how communities can foster resilience, creating environments that support individuals and families facing adversity. Participants will learn to articulate the components of resilient communities, identifying practical strategies to contribute to the reduction of ACEs and the promotion of overall well-being in children and families.

4. Objective: Participants will understand the impact that ACEs may have had on their lives and the lives of others. Through self-reflection and interactive sessions,

participants will develop a personal awareness of the potential impact of ACEs on their own lives and the lives of those around them. The training will facilitate a safe space for participants to explore and share their experiences, fostering empathy and a deeper understanding of the complex effects of trauma. This heightened awareness will contribute to the development of a trauma-informed mindset, enhancing participants' ability to relate to and support individuals who have experienced ACEs in both professional and personal settings.

## **GOT ETHICS?**

When: October 25, 2024

## Presenter: Alan Lyme, LISW, CS

**Description:** \*\*\* This training is scheduled to take place in person. The location is 975 Foot Hills Rd Greenville at the Charles E. Shipman Center. \*\*\*

The substance abuse and behavioral health field are fraught with ethical dilemmas. Navigating boundaries, deciding when and if to break confidentiality, and clinician selfcare are just some of those dilemmas. Lines are often blurred between legal, ethical, and moral influences as we make in-the-moment decisions that can ripple out to create major unforeseen effect. This six-hour training will focus on some of the most common ethical digressions, reinforcing the importance of adhering to agreed-upon standards and the responsibility of maintaining ethical competence.

- Describe the core concepts of ethics in the substance abuse and behavioral health fields.
- Determine how the Codes of Ethics applies to boundary setting in clinical practice.
- 3. Analyze ethical dilemmas clinicians face surrounding boundary setting with respect to utilizing technology with clients in clinical practice
- 4. Develop clear ethical guidelines to address the potential for a dual relationship with a client in a clinical setting.
- 5. Identify the five main perspectives of an ethical decision-making model to help you in clinical practice.
- 6. Describe their own strengths and limitations in ethical dilemmas.

## **ADVANCED GROUP COUNSELING**

When: November 22, 2024

### Presenter: Charissa Wolford, LISW-CP, LAC, CS, MAC

#### **Description:**

\*\*\* This training is scheduled to take place in person. The location is 975 Foot Hills Rd Greenville at the Charles E. Shipman Center. \*\*\*

Groups can often be full of complexities and challenges. This training will provide participants an overview of various potential group dynamics, and potential challenges that could arise across these groups. This training will provide techniques that can be used to address these potential challenges and ways to implement and utilize these techniques. This training will also serve as a space for clinicians to discuss various experiences they have had overcoming these challenges.

- 1. Identify various group dynamics that can be present and potential challenges across these groups.
- 2. Gain insight into helpful techniques and interventions to utilize when presented with these group challenges.
- 3. Discuss and brainstorm with fellow clinicians around past experiences with group challenges and ways to learn from previous experiences.

## **DRUG SCREENING AND INTERPRETATION**

#### When: December 13, 2024

#### Presenter: Dominion

## Description: \*\*\* This training is scheduled to take place on Zoom. \*\*\*

Morning: The Principles of Drug Testing, Alcohol Biomarkers, Principles of Oral fluid Testing

Afternoon: Xylazine, Fentanyl and Marijuana Delta trends and Q&A

#### The Principles of Urine Drug Monitoring (UDM)

"The Principles of Urine Drug Monitoring (UDM)" reviews the fundamentals ("101s") of UDM and result interpretation in the treatment of substance use disorders. This informative presentation reviews the differences between presumptive and definitive testing methodologies, how biological and validity markers can assist when determining specimen integrity, utilization of the laboratory report for result interpretation and monitoring for drug use, and why Creatinine-Adjusted Values (CAVs) are necessary for assessing for abstinence or continued use.

#### **Objectives**

1) Compare and contrast the differences between presumptive and definitive urine drug testing methodologies.

2) Differentiate between presumptive and definitive methodologies on the result report.

- 3) Explain why false positives may occur by EIA.
- 4) List three examples of how a patient may attempt to falsify a urine drug specimen.
- 5) Identify what quantitative drug levels can and cannot be used for.
- 6) Utilize the laboratory interpretive report when interpreting and assessing results.

7) Define creatinine and understand its impact on detected drug levels.

8) Monitor use of substances with long elimination windows (e.g., marijuana) utilizing Creatinine-Adjusted Values (CAVs).

#### Alcohol and Urine Drug Monitoring (UDM)

"Alcohol and Urine Drug Monitoring (UDM)" provides a comprehensive review on alcohol, result report interpretation, and how urine testing of alcohol can assist in monitoring for recent alcohol use and assessing abstinence in the treatment of alcohol use disorder. This introductory presentation reviews testing for ethanol and the alcohol biomarkers, Ethyl glucuronide (EtG) and Ethyl Sulfate (EtS), ethanol fermentation and post-collection EtG synthesis, "incidental" alcohol exposure, and using definitive EtG and EtS LCMSMS testing and Creatinine-Adjusted Values (CAVs) to differentiate between potential sources of a detection.

#### **Objectives:**

1) Explain why urine drug monitoring is a useful objective tool for monitoring alcohol use and assessing abstinence.

2) Define ethanol fermentation and one strategy shown to reduce the chance of it occurring after collection.

3) Explain the advantages of testing for Ethyl glucuronide (EtG) and Ethyl Sulfate (EtS) over ethanol when monitoring for alcohol use.

4) Define post-collection EtG synthesis and why an EtS detection rules out postcollection synthesis as the source of an EtG detection.

5) Counsel individuals about incidental alcohol exposure and avoiding use of ethanolbased products.

6) Identify a false positive on the result report and explain why a false positive EIA result may occasionally occur.

7) Use the result report to differentiate between drinking, incidental exposure, ethanol fermentation, and post-collection EtG synthesis as potential sources.

#### The Principles of Oral Fluid Testing

This is an instructive presentation reviewing the essentials of oral fluid testing. Participants will learn about the strengths and limitations of oral fluid testing, windows of detection, disposition of key drugs in oral fluid, dry mouth syndrome, adulteration, and the collection procedure.

#### Objectives

1) Compare and contrast key differences between oral fluid testing and urine drug monitoring.

2) List factors that may affect whether a prescribed medication is detected despite adherence.

3) Discuss important differences between specific drug classes in oral fluid and apply that knowledge when interpreting results.

4) Define "dry mouth syndrome".

5) Explain why individuals should refrain from eating or drinking anything for 10 minutes prior to collection.

6) List ways that individuals may attempt to adulterate an oral fluid test.

7) Demonstrate proper technique for administering an oral fluid swab.

#### A Look at Current Drugs of Misuse: Fentanyl, Xylazine, and Delta-8-THC

"A Look at Current Drugs of Misuse: Fentanyl, Xylazine, and Delta-8-THC" is aimed at keeping participants up to date and informed about notable drugs of misuse. This educational presentation provides a detailed review on fentanyl, xylazine, and delta-8-THC, including information on monitoring and assessing for use of these substances.

1) Describe fentanyl and why its use is driving the increase in overdose deaths in the United States.

2) Discuss counterfeit pills and why users may not know that they are misusing fentanyl.

3) Identify the potential for extended detection windows in urine following chronic and/or heavy illicit fentanyl use and how to use Creatinine-Adjusted Values to compare over time to assess for abstinence or new use.

4) Describe xylazine and how it may be misused.

5) Identify the substances that xylazine is commonly added to.

6) Counsel on the risks of using xylazine in combination with opioids (e.g., fentanyl).

7) Explain why the opioid rescue medication naloxone is not expected to be effective in a xylazine overdose.

8) Identify a notable adverse effect associated with xylazine use that can be used to screen for potential xylazine use in the absence of testing.

9) Discuss the availability of xylazine test strips that can protect users from unknowing xylazine exposure.

10) Describe delta-8-THC and how it compares to delta-9-THC.

11) Identify different delta-8-THC formulations and where they may be obtained.

12) Discuss the lack of regulatory oversight in the production of delta-8-THC and the potential risks associated with use of an unregulated product.

13) Use the laboratory result report to distinguish between a delta-8-THC and delta-9-THC detection.

14) List potential sources of a delta-8-THC detection and apply this information when interpreting THC results.

## **TRAINERS' BIOGRAPHIES**

**JANUARY:** Margaret Garrett, LPC/S, LAC, AADC is the Quality Manager with the Department of Alcohol and Other Drug Abuse Services. She is a licensed professional counselor, licensed addiction counselor, and advanced alcohol and drug counselor. She brings over 10 years of experience in the SUD field into her current role and seeks to use this experience to support other providers in delivering high quality services.

**FEBRUARY:** Charissa Wolford, LISW-CP, LAC, CS, MAC is currently a Clinical Supervisor for the Phoenix Center in Greenville, South Carolina. As the owner of Helping Healers LLC – Charissa provides clinical supervision and various training opportunities. She is an alumna of the University of South Carolina where she received a bachelor's degree in Experimental Psychology, a Master of Social Work degree, and a Certificate of Graduate study in Drug and Addiction Studies. Charissa has worked in the Alcohol and Drug Treatment field for over 15 years. She has worked previously with medication assisted treatment programs and other various populations including incarcerated youth and adults, and domestic violence survivors. Other notable work has included being a member of the SC Leadership Academy, which has been a South Carolina statewide initiative supported by DAODAS in efforts to produce a streamlined approach to Alcohol and Drug Treatment.

**MARCH:** Alan Lyme, LISW, MAC, ICCS, brings respected and innovative clinical and program management skills as the Training Director for the Phoenix Center in Greenville, South Carolina. Alan is concurrently the Clinical Supervisor for the Screening, Brief Intervention, and Referral to Treatment (SBIRT) grant initiative for the State of South Carolina. Alan has provided trainings nationally on Motivational Interviewing, Clinical Supervision, and Skills on Working with Men. He is a co-author on the book "Game Plan" (2007) with Dr. David Powell. He received a BSW from Florida Atlantic University in 1998 and a MSW from Barry University in 1999. Alan is a MINT recognized Motivational Interviewing trainer, a Certified Clinical Supervisor, a Master Addictions Counselor, and a Certified Master of Leadership Challenge Workshops.

**APRIL:** Antoinette "Toni" Sanders received her Master's degree of Social Work from University of South Carolina. She completed 3000 hours and 100 supervision hours to receive her Licensed Independent Social Work status in 2022. Toni received her certification as grief counselor in 2018 from the Academy of Grief Counseling. For the past 4 years she has served as a school-based therapist with Regenesis Healthcare at Gaffney Middle. She has an extensive background working in Hospice which has

fueled her passion for Grief and Loss. In her free time, she enjoys spending time with family, shopping, eating good food, and traveling.

**MAY:** Helen Yonts, AADC, NCAC-II, LAC, LBSW, has been working in substance abuse counselling for more than 30 years in both Tennessee and South Carolina. She has worked in several treatment levels of care. Through her experience, Helen recognized that not only did trauma play a significant role in substance use disorders as well as other brain diseases, but that trauma treatments were effective, but often could be re-traumatizing and did not have a lasting effect. Helen also recognized the body/mind connection with trauma and that somatic therapies were helpful. She has studied and practiced different trauma therapies including psychotherapy, CBT, DBT, and somatic therapies including TRE or Tension and Trauma Reducing Exercises. Helen is a Certified TRE® Provider, having trained through TRE® For All, Inc. in St. Louis, Missouri and Greensboro, NC. She has been providing TRE® for clients since 2018.

**JUNE**: Theresa Wheeler MS, LPC/S, LAC/S, MAC, CS has over 25 years of experience working in the Mental Health and Substance Use Disorders field. She received her master's degree in Rehabilitation Counseling from Southern Illinois University Carbondale. As the Co-Owner of Evolution of Self: Counseling and Consulting LLC she provides psychotherapy, clinical supervision, and consultation services. She is trained in multiple CBT approaches: Matrix Model (Key Supervisor), Cognitive Processing Therapy, TF-CBT (Rostered in SC), DBT, CBT for Insomnia, and CBT for Suicide as well as being highly trained in Motivational Interviewing. She strives to see the meaning in all behavior and to help other clinicians to be able to identify their own part within the reciprocal relationship with client(s) as well as see the client through a lens of compassion and empathy.

**JULY: Dr. Jennifer Geddes Hall, LPCS/LCMHC, RPT** is an associate clinical professor at Clemson University. She has experience as a child/teen therapist, school counselor, and clinical supervisor in rural and urban areas. Dr. Hall has provided counseling services in a variety of settings including schools, group practice, and agency settings where she practiced child-centered play therapy (CCPT). She has presented on play therapy at several local, regional, and national conferences. Dr. Hall is currently on the board for the South Carolina Association for Play Therapy (SCAPT). She has also published an article in the International Journal of Play Therapy in 2019 titled, Child Centered Play Therapy as a Means of Healing Children Exposed to Domestic Violence, which was the fourth most downloaded article of the year according to the APA.

**AUGUST:** Maranda Beaver, LMSW is a licensed social worker and Community Outreach Coordinator with the South Carolina Department of Mental Health Office of Suicide Prevention. Maranda began working in suicide prevention after losing her uncle to suicide in 2013. As an undergraduate student at the University of South Carolina, she began volunteering with the SC Chapter of the American Foundation for Suicide Prevention where she is currently serving her 7th year on their board of directors. Maranda is trained in several evidence-based suicide prevention interventions

**SEPTEMBER:** Jill L. McHugh, LISW-CP, is an international trainer specializing in trauma-informed care and Adverse Childhood Experiences (ACEs). Through her education program, beTI (be Trauma Informed), she offers comprehensive courses and training to clinical and non-clinical professionals as well as those in the kids' sports and activities industry such as swim instructors and little league coaches. In addition to beTI, Jill is the owner and clinical director of JL McHugh Counseling, a private counseling firm. With a wealth of experience spanning over two decades as a social worker and nonprofit leader, Jill brings her expertise in trauma and youth program development to businesses and organizations worldwide. In her free time, Jill loves spending time with her husband and daughter.

OCTOBER: Alan Lyme, LISW, MAC, ICCS, See March

NOVEMBER: Charissa Wolford, LISW-CP, LAC, AADC, MAC, See February

**DECEMBER:** Arthur J. Rodrigues, Director of Clinical Services Clinical Pharmacist, RPh, graduated in 1980 with a Bachelor of Science from the University of Rhode Island's College of Pharmacy. He was a practicing pharmacist for 20 years before becoming the current Director of Clinical Services at Dominion Diagnostics, a national medical laboratory based in Rhode Island. Mr. Rodrigues served on the faculty at the North Carolina School for Alcohol and Drugs Studies, and has presented clinical diagnostics and pharmacology lectures at numerous State and National meetings.

Jennifer Lee, Supervisor of Clinical Services, Clinical Pharmacist, RPh, graduated in 1994 with a Bachelor of Science degree from the University of Rhode Island's College of Pharmacy. She began her career practicing in community pharmacy, and quickly found she had an interest in clinical work. She moved to Denver, CO where she worked for Kaiser Permanente Anticoagulation Services Department for 11 years. In this role she managed a patient panel of approximately 500 patients, adjusting anticoagulation medication doses, and providing extensive education. Upon returning to Rhode Island, Jennifer performed prior authorization reviews for CVS/Caremark. In

addition to her role there, she developed a pharmacy technician certification course and organized continuing education seminars for the pharmacist staff. Since 2010 she has worked for Dominion Diagnostics' Clinical Services Department. As part of their team of clinical pharmacists, she educates providers and assists with results interpretation of urine and oral fluid drug testing. She is also responsible for writing educational resources that are utilized as an adjunct to phone or email consultations. These include a wide array of informative quick reference documents pertaining to drugs of misuse and testing, as well as bimonthly clinical communications aimed towards keeping the readers abreast of relevant clinical information.

#### Lisbeth O'Brien, Clinical Services' Education Coordinator, Clinical Pharmacist,

**RPh, PharmD.** After receiving a Bachelor of Arts in Psychology and French Language and Literature from Boston College, Lisbeth O'Brien attended Massachusetts College of Pharmacy and Health Sciences where she received her Doctor of Pharmacy degree in 2014. Following graduation, she worked as a community pharmacist and developed a passion for patient education and counseling, as well as for training pharmacy technicians and precepting student pharmacists. This included a preceptor role with Fairleigh Dickinson University's School of Pharmacy while working as a pharmacy manager in New Jersey. During this time, Lisbeth hosted and precepted student pharmacists at her practice site during their Introductory and Advanced Pharmacy Practice Experiential rotations. In 2021, she joined Dominion Diagnostics' Clinical Services department. As part of their team of clinical pharmacists, she leverages her pharmacy background and education to assist with drug monitoring and result interpretation in the treatment of substance use disorders and chronic pain. In line with her commitment to education, she is responsible for organizing and presenting Clinical Services' educational presentations to clients of Dominion Diagnostics looking to enhance their knowledge of urine drug testing and monitoring.







**CORNERSTONE** GREENWOOD - EDGEFIELD - MCCORMICK - ABBEVILLE COMMISSION ON ALCOHOL AND DRUG ABUSE









Anderson/Oconee Behavioral Health Services





State of South Carolina Department of Mental Health



