



# The Steering Wheel

Your resource for behavioral health trainings, events, program information, news, and more around the Shore.

April 2018

Volume 7, Issue 16

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## Nation's Top Doc Wants The Overdose Antidote Widely On Hand. Is That Feasible?

The Washington Post

By Shefali Luthra, Kaiser Health News and Rachel Bluth, Kaiser Health News

*April 18<sup>th</sup>, 2018*

When Surgeon General Jerome Adams issued an advisory calling for more people to carry naloxone — not just people at overdose risk, but also friends and family — experts and advocates were almost giddy.

This is an “unequivocally positive” step forward, said Leo Beletsky, an associate professor of law and health sciences at Northeastern University.

And not necessarily a surprise. Adams, who previously was Indiana's health commissioner, was recruited to be the nation's top doctor in part because of his work with then-Gov. Mike Pence, now the vice president. In Indiana, Adams pushed for harm-reduction approaches, which included expanded access to naloxone and the implementation of a needle exchange to combat the state's much-publicized HIV outbreak, which began in 2015 and was linked to injection drug use.

Others cautioned, though, that his have-naloxone-will-carry recommendation is at best limited in what it can achieve, in part because the drug is relatively expensive.

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Kaiser Health News breaks down what the advisory means, experts' concerns and what policy approaches may be in the pipeline.

Many public health advocates applaud the surgeon general's position.

Naloxone, which is a drug that can keep drug users alive by reversing opioid overdoses, is viewed by many as the cornerstone of the harm-reduction approach to the epidemic. Experts say people with addiction problems should carry it, and so should their family, friends and acquaintances.

"We want to put it more in reach," said Traci Green, an associate professor of emergency medicine and community health sciences at Boston University, who has extensively researched the opioid abuse crisis. "It could not have been a better endorsement."

Others, including Diane Goodman, who penned a recent Medscape commentary reflecting on the advisory, wonder whether this is a "rational" response to the scourge, since opioid addiction is one of many health problems people might encounter in everyday life and for which treatment options are still limited.

"I'm not sure it makes much more sense than any of us carrying a bottle of nitroglycerin to treat patients with end-stage angina," wrote Goodman, an acute-care nurse practitioner, referring to chest pain.

"What, exactly, are we offering to addicts once their condition has been reversed?" she asked, noting that without treatment and therapy programs that help wean people from addiction "the odds of survival for any length of time remain low, no matter how much reversal medication is kept nearby."

Results would likely be limited by naloxone's price tag.

Take Baltimore, which has been hit particularly hard by the opioid epidemic. Its health department already has pushed for more people to carry naloxone.

But the drug's price is an issue, said Dr. Leana Wen, the city's health commissioner, and an emergency physician. She suggested that the federal government negotiate directly for a lower price, or give more money to organizations and agencies like hers so they can afford to maintain an adequate supply.

“Every day, people are calling us at the Baltimore City Health Department and requesting naloxone, and I have to tell them I can’t afford for them to have it,” Wen said.

The drug is available in generic form, which can be stored in a vial and injected via a

needle, as well as in patented products, such as the nasal spray Narcan, sold by ADAPT Pharmaceuticals, and Kaleo’s Evzio, a talking auto-injector.

Generic naloxone costs \$20 to \$40 per dose. Narcan, the nasal spray, costs \$125 for a two-dose carton, according to ADAPT’s website. A two-pack of Evzio costs close to \$4,000, according to GoodRx.

Health departments and first responders qualify for a discounted rate of \$75 per carton of Narcan. Kaleo has made Evzio coupons available to consumers, so that some will not have a copay, and it advertises a discount for federal and state agencies.

Skeptics point out that similar methods have been used to build brand loyalty and potentially make a particular product a household name. That’s how Epi-Pen became synonymous with epinephrine for the treatment of anaphylactic shock.

“There’s clearly some overlap” here between the pricing strategies used by naloxone manufacturers and Epi-Pen distributor Mylan, said Richard Evans, co-founder of SSR Health, which tracks the pharmaceutical industry.

But it’s not a perfect comparison. The presence of low-cost generics changes the calculus, he said, as does the different level of demand.

Nonprofit organizations and health care providers keenly feel the pressures of increasing demand and cost.

Experts say price breaks on naloxone are not sufficient to cover the costs on the ground.

“Sixty-four thousand people lost their lives [nationally in 2016] — that’s someone every 12 minutes,” said Justin Phillips, executive director of Overdose Lifeline, an Indianapolis-based nonprofit. “Ten free kits is not going

to be enough.”

Phillips said her organization relies on generic naloxone, which is the least expensive formulation. It’s the only feasible option, using dedicated grant money the group received from the state attorney general’s office as part of a program funded by a settlement with pharmaceutical companies.

But that money is almost dried up. “We need to be able to access naloxone — which I’m told is pennies to make — for the pennies it cost to make it,” Phillips said.

Phillips, who worked with Adams when he ran Indiana’s health department, said she has discussed the need for naloxone funding with the surgeon general, but never its price.

Pharmacies assess the hurdles of distribution.

Local pharmacies are key in this chain, but the overdose antidote is new territory for many pharmacists, said Randy Hitchens, the executive vice president of the Indiana Pharmacists Alliance. He said in 2015, when Adams began his push to get naloxone into the hands of drug users and their families, only one or two retail pharmacies carried it.

“This has always been an emergency room drug. Retail pharmacists typically were not used to dealing with [it],” Hitchens said. “A lot were probably saying, ‘What in the devil is naloxone?’”

Today, he estimates 60 to 70 percent of Indiana’s more than 1,100 retail pharmacies carry the drug. Walgreens, the pharmacy chain, has committed to stocking Narcan.

Access, though, is always subject to retail pressures.

“If pharmacies are not seeing a steady stream coming in asking for it, they won’t be incentivized to carry it on their shelves,” said Daniel Raymond, the deputy director of policy and planning for the Harm Reduction Coalition.

He’d like to see the federal government step in to negotiate prices where smaller programs can’t.

A patchwork of other decentralized sources for naloxone exist: syringe-

exchange vans, county and state health departments, churches and community centers, all trying to find ways to get overdose medication into the hands of people who need it.

That supply stream “meets people where they are,” Raymond said, but those little programs don’t have the muscle to negotiate discounted prices.

“Individual health programs are trying to navigate the crisis on their own, but when you see ... growing demand and limited supply, it’s a role for federal intervention,” Raymond said.

The surgeon general’s message is one part of Washington’s broader response to the epidemic. But even as Congress crafts an opioid epidemic response package, it’s not clear it will tackle these concerns.

In the House of Representatives’ Energy and Commerce Committee, one bill being discussed would require all state Medicaid programs to cover at least one form of naloxone. Currently, not all state Medicaid programs do so.

A Senate bill would authorize \$300 million annually to equip first responders with naloxone.

But critics say those approaches still don’t address the underlying problems: cost and funding.

“You can either make naloxone available, at a much discounted price, or we need to have a lot more resources in order to purchase it,” Wen said. “I don’t care which one. My only concern is the health and well-being of our residents.”

*Kaiser Health News (KHN) is a national health policy news service. It is an editorially independent program of the Henry J. Kaiser Family Foundation which is not affiliated with Kaiser Permanente.*

Article: [https://www.washingtonpost.com/national/health-science/nations-top-doc-wants-the-overdose-antidote-widely-on-hand-is-that-feasible/2018/04/18/1ac5ce8a-4317-11e8-b2dc-b0a403e4720a\\_story.html?utm\\_term=.03fae5b18e1b](https://www.washingtonpost.com/national/health-science/nations-top-doc-wants-the-overdose-antidote-widely-on-hand-is-that-feasible/2018/04/18/1ac5ce8a-4317-11e8-b2dc-b0a403e4720a_story.html?utm_term=.03fae5b18e1b)

# JOB OPENINGS

The **Dorchester County Health Department** is seeking a part-time **LCSW-C** to provide individual, group and family therapy to students enrolled in our School-Based Wellness Center program.

Perfect opportunity for a skilled clinician who would love a family-friendly schedule in a supportive environment. Join our fantastic team and make a difference for youth in an under-served community!

To learn more, email [beth.spencer@maryland.gov](mailto:beth.spencer@maryland.gov) or call 410-901-8177. EOE



**Project Chesapeake** is an outpatient behavioral health program located in Denton, MD. We are looking for a motivated **Licensed Addictions Counselor** to join our team on a full-time basis in the evenings. This individual will work

**Monday-Thursday 11AM- 9:30 PM**

- Develops, facilitates, and documents group therapy, including family therapy and education.
- Develops, implements, and maintains treatment plans for clients based on the comprehensive assessment, by identifying problem areas, outlining desired treatment outcomes, developing strategies for achieving these outcomes, and setting target dates for identified objectives.
- Complies with federal and state regulations on privacy, confidentiality, and client's rights.
- The candidate should be a licensed addictions counselor in the state of Maryland and possess one of the following designations:

**ADT, CSC-AD, CAC-AD, LCAD-C, LGAD-C, LCSW-C, LGSW, LGPC, LCPC**

- You will conduct intakes/assessments and act as sole counselor in the following group setting  
Outpatient (Level I)  
Intensive Outpatient (Level 2.1)

Compensation will vary based on experience and license.

**Job Type: Full-time**

To apply, contact **Dan Smith** HR Manager by email at [dsmith@projectchesapeake.com](mailto:dsmith@projectchesapeake.com) or by phone at 443-440-5791

# **20<sup>th</sup> Annual Caliber Awards**

**LAST DAY TO NOMINATE  
IS FRIDAY APRIL 20<sup>TH</sup>**

**Let us know who has been  
making a difference for our  
behavioral health community!**

**To view nomination categories or to  
submit a nomination please go to:**

**<https://www.surveymonkey.com/r/6LYDB56>**

# **STEERING COMMITTEE MEMBERS NEEDED FOR THE MID SHORE CRISIS INTERVENTION TEAM (CIT)!!!**



The Mid Shore Crisis Intervention Team (CIT) Steering Committee will be a small working group that that consists of seven to 15 members. Committee members volunteer their time and expertise to ensure that the mission and objectives of the program are achieved. The Steering Committee is composed of representatives from state and local law enforcement agencies, the state mental health system and other mental health providers, hospitals and universities, and consumer and family-based alliances. Local judges, attorneys, county mental health directors, advocates, consumers, and other volunteers from both the public and private sectors also serve on the Steering Committee. The Committee will convene quarterly to discuss improvements to the program. This forum will utilize subcommittees to identify and develop resources and to inform and involve the community.

If you are interested in serving on the CIT Steering Committee or need more information please contact Brandy James at [bjames@santegroup.org](mailto:bjames@santegroup.org)

# LDAAC TRAINING OPPORTUNITY

## How will the Eastern Shore avoid an outbreak of HIV?

Rising overdose deaths and ED visits reveal an increasing amount of injection drug use on the Shore. Absent new access to sterile injection equipment, an outbreak of HIV seems inevitable. The Maryland Department of Health has resources to support the development and implementation of Syringe Services Programs to help prevent the spread of HIV, Hepatitis C and other infections. Participants in SSP have been found to be five times more likely than non-participants to enter drug treatment. While there are several new programs throughout MD, there are none on the Eastern Shore. Come learn more about the need and opportunity to add a critical missing piece to a comprehensive response to the opioid crisis.



MARYLAND  
Department of Health

Kip Castner, MPS, Chief,  
Center for HIV/STI  
Integration & Capacity

Maryland Department of  
Health, Prevention and  
Health Promotion  
Administration

Syringe  
Services  
Expansion in  
Maryland

### Syringe Services Programs for HIV Prevention



1 in 10

1 in 10 HIV diagnoses  
are among people  
who inject drugs  
(PWID).



50%

More than half of  
PWID used a syringe  
services program  
in 2015.



1 in 4

Only 1 in 4 PWID  
got all their syringes  
from sterile sources  
in 2015.

SOURCE: Vital Signs, December 2016

**Vital** signs™  
CDC

www.cdc.gov/vitalsigns/hiv-drug-use



**Date:** Friday, April 27, 2018  
**Time:** 12:00 - 1:00 PM - Bring Your Lunch!  
**Location:** Queen Anne's County Health Department  
206 N. Commerce St., Centreville, MD 21617



## **Webinar: Addressing Intimate Partner Violence in Integrated Care Settings**

**April 30, 2018**

**2:30 - 4 p.m. ET**

Presenters: Shannon Day, Training and Technical Assistance Manager, Colorado Coalition Against Domestic Violence; Lisa James, Director of Health, Futures Without Violence

Register free: [https://goto.webcasts.com/starthere.jsp?ei=1188592&tp\\_key=ae78523711](https://goto.webcasts.com/starthere.jsp?ei=1188592&tp_key=ae78523711)

About one in four women and one in seven men have experienced severe physical violence by an intimate partner at some point in their lifetime. Among the victims of intimate partner violence, one in three women experienced multiple forms of rape, stalking, or physical violence, and nine in 10 male victims experienced physical violence alone. (National Intimate Partner and Sexual Violence Survey, CDC 2010.)

Given these statistics, intimate partner violence is a prevalent public health problem affecting millions every year and directly impacting the behavioral health of survivors.

Join us for a webinar to learn about prevention strategies, universal education, direct inquiry techniques, and best practice approaches related to intimate partner violence.

After this webinar, participants will:

- Know the prevalence and symptoms of intimate partner violence and the connection to poor behavioral health outcomes.
- Learn best practices for prevention, identification, and response to intimate partner violence in primary care, behavioral health, and integrated care settings.
- Understand how to offer a supported referral to community-based programs who can assist with safety planning and support.
  - Become familiar with resources to support clients.

Please note the following:

Registration is free and closed captioning is available upon request.

# safeTALK Training

**safeTALK T4T is a two-day course that prepares local resource persons to be trainers of the safeTALK workshop. There is a network of 3,300 active trainers around the world. Before registering, all candidates must have attended the 2-day ASIST workshop within the last 24 months, and read the Essential Information for safeTALK Candidate Trainers PDF. Download a copy below, or at Programs/safeTALK T4T. The T4T course is the first step toward becoming a registered safeTALK trainer. In the course, attendees learn the content and process of safeTALK and the skills needed to conduct it. The process of becoming a registered safeTALK trainer requires a significant commitment from participants. The opportunity to provide life-saving suicide alertness skills is well worth the effort.**

Microsoft Office 2013 PowerPoint is required on trainer laptops in order to deliver workshops. Lunches and nutribreaks included.

**Dates:** Monday May 21st, 2018 - Tuesday May 22nd, 2018

**Time:** 8:00am - 5:00pm

**Location:** Vocational Rehabilitation Building – OWDT Training Room  
Spring Grove Hospital Center Campus - 55 Wade Avenue  
Catonsville, Maryland, USA

**Registration Deadline**

**Friday May 11th, 2018**

Contact

Janel Cabbage

Janel.cabbage@maryland.gov

410-402-8576

Attachments

[2A4.2EN6001-EssentialInfoForCandidates-T4T-1.pdf](#)

[safeTALK-10.2-T4T-Schedule.pdf](#)



# THE POWER OF PERCEPTIONS AND UNDERSTANDING:

Changing How We Deliver Treatment  
and Recovery Services

**SAMHSA**, together with Massachusetts General Hospital's Recovery Research Institute, is offering a webcast series, *The Power of Perceptions and Understanding: Changing How We Deliver Treatment and Recovery Services*. The four-part series educates health care professionals about the importance of using approaches that are free of discriminatory attitudes and behaviors in treating individuals with substance use disorders and related conditions. The series will feature discussions among experts in the field of addiction treatment, research, and policy. The webcasts will air live at 2 p.m. Eastern Time on the following dates:

- March 28, 2018: "Overcoming Stigma, Ending Discrimination"
- April 26, 2018: "Why Addiction Is a Disease and Why It's Important"
- May 22, 2018: "Reducing Discriminatory Practices in Clinical Settings"
- June 19, 2018: "A Future Without Discrimination and Discriminatory Practices"

Earn up to 4.0 free CME/CE credits for attending each of the 1-hour online webcasts. Each presentation will be available afterward on SAMHSA's YouTube Channel.

[\*\*Learn More & Register for the Series\*\*](#)



**FREE  
TRAINING**  
5 CEUS

**MID SHORE BEHAVIORAL HEALTH PRESENTS**

**TBI Special Populations:  
The Connection between Aging and Brain  
Injury and the Impact of TBI on Veterans**

**5.22.2018**

9AM-3PM | TUESDAY

EASTERN SHORE HOSPITAL CENTER  
ENGLISH HALL

**Trainer: Anastasia  
Edmonston, BHA**

**CONTINENTAL BREAKFAST  
AND LUNCH PROVIDED**

**To register or  
learn more:**

<https://www.eventbrite.com/e/tbi-special-populations-tickets-45061150113>

# NOT ALL WOUNDS ARE VISIBLE

A Community Conversation  
Let's Talk About Depression and Anxiety - Part I



Wednesday, May 23, 2018 | 9 am - 12:30 pm

**UMB Campus Center**  
621 West Lombard Street  
Baltimore, Maryland 21201



For more information and locations where this event will be broadcast live or to register, please visit:  
[umms.org/communityhealth](http://umms.org/communityhealth)

## Join a LIVE broadcast of this event at a location near you:

- UM St. Joseph Medical Center (Towson, MD)
- UM Charles Regional Medical Center (La Plata, MD)
- UM Shore Regional Health (Easton, MD)
- UM Capital Region Health (Cheverly and Laurel, MD)
- UM Upper Chesapeake Medical Center (Bel Air, MD)

*Registration required for all locations.*

Join the University of Maryland Medical System and the University of Maryland, Baltimore on **Wednesday, May 23, 2018 from 9 am to 12:30 pm for a FREE community conversation about the impact of depression and anxiety on women and children.** This event is open to the public and provides an opportunity to hear from and talk to health care professionals and community leaders about depression and anxiety and the road to recovery. **You will not want to miss this chance to ask questions and learn how to get help in your local community, so register today at [umms.org/communityhealth](http://umms.org/communityhealth) or 1-800-492-5538.**

Join us for FREE discussions, breakfast, and resources | [umms.org/communityhealth](http://umms.org/communityhealth)



Presented by **University of Maryland Medical System** and **University of Maryland, Baltimore**



# LITERACY-FREE 12 STEP EXPRESSIVE ARTS THERAPY

MAY 8TH & SEPT 20TH

9AM-4:30PM

6 CEUS

Training & materials for a 10 lesson group curriculum using music, horticulture, play, drama, dance, art & handicrafts to work through the 12 Steps.



**\$95 Per Person - CORPORATION**  
**\$75 Per Person - NONPROFIT**

Clinical studies found it to produce statistically significant results with greater participant engagement, feelings of hopefulness, as well as much higher completion rates, lower drop-out rates and enrollment in follow up services than non-participants.

Designed for people with co-occurring substance use & mental health disorders. Engages people who are non-literate and learning disabled. Helps those with difficulty of self-expression participate in treatment.

[www.CoLaborers.com/ExpressiveArts](http://www.CoLaborers.com/ExpressiveArts)



INCLUDES:  
TRAINING,  
CURRICULUM,  
TUTORIAL DVD,  
& GAME

**REGISTER BY APRIL 20/ AUG 1:**

EMAIL  
[MELISSA@COLABORERSINTERNATIONAL.COM](mailto:MELISSA@COLABORERSINTERNATIONAL.COM)

## TRAINING LOCATION

HOPE FELLOWSHIP  
892 WASHINGTON AVE,  
CHESTERTOWN, MD 21620

# Active Shooters & Suicide

## Learn Pre-Indicators & Response Strategies

**When:** Friday May 4<sup>th</sup> 8 – 9 a.m. (Check-in) 9 a.m. – 4:00 p.m. at the Wicomico Civic Center.  
**Address:** 500 Glen Avenue, Salisbury Maryland. Sponsored by the Mental Health Association of the Eastern Shore and the Rural Maryland Council. Have questions or to register, please call 410-822-0444 or email Danielle Murphy at [dmurphy@mhamdes.org](mailto:dmurphy@mhamdes.org). Seating is limited for this event.

Violent acts such as mass murder, murder/suicide, and suicides are an unfortunate occurrence in the United States. Mass killings and increased suicide rates have prompted organizations, police departments, schools, and mental health practitioners to re-evaluate current training and preparedness practices, interventions, and response strategies to early identify and act in times of crisis. Participants will gain insight into these tragic events while learning strategies to prepare, prevent, intervene, and increase chances of survival.

### Participants will gain an understanding of:

- Planning for crisis situations & Identifying pre-indicators to violence
- Understanding the Suicide Continuum
- Threat & Suicide Risk Assessment In Schools
- Psychological/physiological effects of life threatening encounters
- The decision-making cycle to increase victim survivability
- Intuition and situational awareness

**5.5 Continuing Education Hours    Continental Breakfast & Lunch Included    Cost \$60.00**



### **James P. Warwick, Ed.D**

Dr. Warwick is recognized as an expert trainer and national speaker on active shootings and how to increase your chances of intervening and surviving violent encounters. Jim is a retired 26-year veteran of the Delaware State Police and currently serves as Assistant Professor and Chair of the Undergraduate Criminal Justice program at Wilmington University. Jim's research explored training and preparedness for active shooting incidents. Jim's full-bio and website can be accessed <http://www.s3gsecurity.com/about.htm>



### **Robert Schmidt, Ed.D, LCPC, NCC**

Dr. Schmidt is a national speaker and researcher on youth mental health and suicide. Rob co-authored with Dr. Kathryn Seifert, *How Children Become Violent* (2006) and *Youth Violence* (2011). He has led studies and published in the field of youth suicide, school mental health, was a contributor to *Preventing Suicide: A Toolkit for High Schools* (2012) and is the author of the *Risk Identification Suicide Kit (RISK, 2009)* assessment tool. Rob's full bio and website can be accessed <http://www.suicideriskassessment.com>

### **Who Should Attend**

School Counselors, School Psychologists, Law Enforcement, Mental Health Practitioners, Human Resource Personnel, College Administrators & Security Staff, School Administrators, Military Personnel, Health Care Professionals, Business Leaders, Teachers, Public Officials, and Parents

*In recognition of National Nurses Week 2018*

**Theme: Nurses Inspire, Innovate,  
Influence**

**Please join us for a workshop on:**

***LOSS & GRIEF :  
IMPLICATIONS FOR  
HEALTH CARE  
PROVIDERS***

**What to expect...**

Identify and understand the concept and process of loss and grief across the life span - from childhood through adults;

Discuss the challenges of loss and grief faced by health care providers;

Plus guidelines for keeping oneself fit!

**Who should attend:**

All Healthcare Provides /Advanced Practice Practitioners;

Clinical coordinators,

Charge nurses,

Nurse managers,

Pharmacists,

Care coordinators,

Rehabilitation staff,

Social workers,

Professional Nursing Practice Staff

**How to register...**

Please contact Bruce Singley RN MSN MS PMHCNS-BC

By e-mail: [bsingley@umm.edu](mailto:bsingley@umm.edu) or phone: 410-228-5511 x 2019

**Workshop Date**

**May 8, 2018**

**Tuesday**

**1000 - 1400**

**Chesapeake College**

**Eastern Shore Higher  
Education Center**

**QUESTIONS?**

Contact

Bruce Singley

410-228-5511 x 2019

This activity has been submitted to Shore Regional Health for approval to award contact hours. Shore Regional Health is an approved provider of continuing nursing education by the Maryland Nurses Association, an accredited approver by the American Nurses Credentialing Center's Commission on Accreditation.



# REGISTRATION NOW OPEN

## *2nd Life Matters*

### Harford County Suicide Prevention Conference

*Friday, May 18, 2018*

Mountain Christian Church  
New Life Center  
1802 Mountain Road  
Joppa, MD 21085

**Registration information :**  
[www.harfordmentalhealth.org](http://www.harfordmentalhealth.org)

#### Keynote Speaker

#### Kevin Briggs

"Guardian of the Gold  
Gate Bridge"



6 CEU's available  
for Social Workers,  
Professional Counselors,  
and Psychologists

**Sergeant Kevin R. Briggs, Ret.**, is a retired California Highway Patrol officer who spent many years patrolling the Golden Gate Bridge in San Francisco. While on patrol, he encountered numerous individuals clinging to life by a thread - individuals who had lost hope and could see no way out of their current situation - ready to jump off the bridge to what they assumed was a sudden death and ending of their pain and hopelessness. Briggs, through his compassion, gentle voice, eye contact, and his innate ability of "listening to understand" encouraged more than 200 individuals over his career to either not go over the bridge's rail or come back to solid ground from where they had been standing precariously out on the chord of the bridge and start a new chapter in their life. These challenging, but rewarding efforts earned him the nickname "Guardian of the Golden Gate Bridge."

## The Lip Sync Battle is only TWO DAYS AWAY!!!

The 2nd installment of our **Lip Sync Battle fundraiser** is this **Saturday**, April 21st, at the Waterfowl Building (old armory) in Easton. This year, our Executive Director **Julie Lowe**, Operations Manager **Fran Doran**, and Marketing and Communications Director **Jayne Dingle** are competing as **Team TIS!** Check out their preview video below:



**Talbot  
Interfaith  
Shelter**

### How Can YOU Support Team TIS?

**Buy tickets!** At the event, your ticket is your ballot. Use it to vote for Team TIS!

**BUY NOW**

**Vote for Julie, Fran, and Jayme by making a donation to TIS.** Every dollar is a vote!

**VOTE FOR TIS**

**Vote for any of the other participating teams!** No matter who wins on Saturday, TIS still wins. All of the proceeds support our shelter & transitional housing program!

**VOTE NOW**

The secret to **Getting Ahead** is getting started.

- Mark Twain

FUTURE



## 11 Resources

Personalize your plan to a better life utilizing these key resources:

-  Financial
-  Emotional
-  Language
-  Mental / Cognitive
-  Social Capital (Connections)
-  Physical
-  Spiritual
-  Motivation / Persistence
-  Integrity / Trust
-  Relationships / Role Models
-  Knowledge of the 'Hidden' Rules

NEEDED FOR COMMUNITY INVESTIGATIVE GROUP - WHY NOT YOU? WHY NOT NOW?

DO YOU WANT TO HELP WORK ON PERSONAL AND COMMUNITY ISSUES & SOLVE REAL PROBLEMS WITH REAL SOLUTIONS?

DO YOU FEEL YOU HAVE VALUABLE INFORMATION ABOUT YOUR COMMUNITY THAT IS NEEDED BY PROGRAM PLANNERS AND POLICY MAKERS?

**APRIL 17TH – JULY 17TH 2018**  
**13 WEEKS – 2 HRS PER WEEK**

### Program for Building a Better Life & Community

Getting Ahead is internationally recognized for its interactive small group format. No one "teaches" you what you need to learn – you discover what's best for you when you agree to:

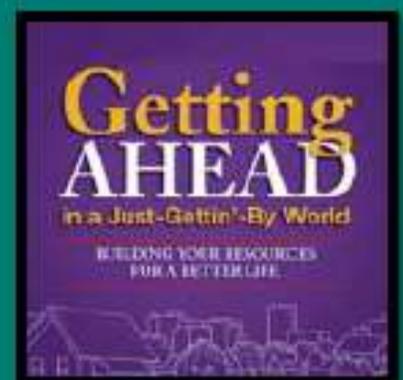
- Participate in problem-solving discussions and investigations.
- Help your community by finding better ways to help people out of poverty.
- Must be able to commit to weekly 2 hr meetings for 13 weeks – you will be compensated \$25 each session (in the form of a gift card)

**Where:** Easton Family YMCA 202 Peachblossom Rd. Easton, MD 21601

**When:** Weekly starting April 17<sup>th</sup> 5:30- 7:30pm

**How to register:** Please contact Paris Quillet at [paris.quillet@maryland.gov](mailto:paris.quillet@maryland.gov) or 410-770-5870

Sponsored by Talbot County Department of Social Services and the Talbot Family Network



Participants receive weekly stipends, childcare, dinner and transportation assistance for their participation in the program.



## How to Support Children and Those Impacted by Random Acts of Violence

In the wake of the recent school shootings in Florida and Maryland, many children are experiencing intense feelings of fear and anxiety. Such traumatic events impact children, parents, and communities as a whole. It's crucial for parents and caregivers to address children's concerns, yet many struggle with knowing how to do so.

Join Beacon Health Options for a discussion on how to support children and those impacted by random acts of violence. Jeff Gorter, Director of Clinical and EAP Relations at R3 Continuum, will share suggestions for addressing children's fears. We'll discuss how the employee assistance program can support your workforce in navigating these important conversations with their children.

Register now to join the discussion.

Friday, April 20, 2018

12:00 p.m. ET/9:00 a.m. PT

[Register Here](#)

**APRIL 21**  
**8 am - 4 pm**



Maryland Coalition of  
Families' Taking Flight



**MCF's Taking Flight & On Our Own of Maryland's TAY Project Present:**

## **A Young Adult Peer Leadership Retreat**

### **Terrapin Adventures**

**April 21, 2018**

Join MCF's Taking Flight and On Our Own of Maryland's TAY Project for a day of adventure on the ropes course, peer networking with young adult behavioral health stake holders from across the State, and a focus group on the state of behavioral health and care among youth in Maryland.

Light breakfast and lunch will be provided but space is limited.

Registration information at: [www.facebook.com/TakingFlightMD](http://www.facebook.com/TakingFlightMD) or  
[www.mdcoalition.org/YouthRetreat](http://www.mdcoalition.org/YouthRetreat)

**For more information contact:**

**Jonathan:** [jweaver@mdcoalition.org](mailto:jweaver@mdcoalition.org) -or- **Maxwell:** [mbeauboeuf@mdcoalition.org](mailto:mbeauboeuf@mdcoalition.org)

*save the date*

# HEALTH LITERACY HUDDLE

*A dialogue on health literacy in Maryland*

**APRIL 25, 2018**  
**UMD - COLLEGE PARK**  
**SCHOOL OF PUBLIC HEALTH**  
**11:00 A.M. - 12:30 P.M.**

to benefit:



# You're Invited

April 29th, 2018 at 3:00pm

# \$40 Per Person

**Featuring:**

A Fancy Hat Contest,  
Silent Auction,  
Cash Bar,  
Lots of Shopping,  
& Delicious Food!

Buy Your Tickets at  
[Haven-Ministries.org](http://Haven-Ministries.org)  
or Our Daily Thread Thrift Store  
Stevensville, MD



Located at:

**Prospect Bay**  
COUNTRY CLUB  
331 Prospect Bay Dr. West  
Grasonville, MD



[www.haven-ministries.org](http://www.haven-ministries.org)  
call 410.977.2089 for details

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**Cloverton BLOOM Tour**  
**May 4th**  
**March 29, 2018**



Centreville United Methodist Church in Centreville, Maryland announces that the band CLOVERTON will be performing on Friday, May 4th as part of their BLOOM tour. Admission is free and a love offering will be received to benefit Haven Ministries. With the quickening success of their sophomore album “Bloom,” the 4 piece pop-rock outfit extends their cd release tour to hit the east coast in the spring of 2018. Led by front man, Lance Stafford, the tour and album bring a new collection of original songs to a world that is hungry for music with depth and substance. Produced by Joshua D. Niles, Nashville, TN, this is CLOVERTON’s second full-length album, in addition to 3 EPs.

The Bloom tour focuses on the journey. “It’s a calling out...an invitation,” says Stafford. “We’re all in a constant state of motion. We’re either transforming into a more heavenly version of ourselves, or we are deforming into the opposite. The music that inspired the album (Bloom) takes a deeper look into the steps on that journey. From celebration to contemplation, the album and the tour provide a space and time for people at all places on their journey to engage in a worshipful musical experience birthed out of spiritual transformation. Many of the songs were written in the midst of my own spiritual awakening. Our lives don’t stay the same. Culture changes. We get older. We have kids. They get older. And throughout all those changes, we must bloom more and more into the creation that God has intended in each of us. We are seeing people respond to that invitation. They are hungry. They are unfolding. And we really see it having an impact on the kingdom.”

Without the help of a record label, Cloverton propelled onto the Christian music scene in 2011 as the first ever ROCK THE CAMP contest winners hosted by TobyMac and Camp Electric. Soon after, Cloverton scored the #1 most downloaded song in the history of KLOVE radio for their first single “Take Me into the Beautiful”. The band followed up that effort with an unforgettable Christmas rendition of Leonard Cohen’s song “Hallelujah,” reaching millions of viewers (YouTube) in just weeks while climbing to the #1 slot on iTunes and being featured on CNN.

“None of us are into compromising or settling for the status quo. It’s a daily choice. To what or who am I surrendering today?” front man Lance Stafford says. “We are either moving toward or away from the person God has specifically created each of us to be. Our hope is that the music we create can accompany others as they walk out that journey.”

Visit [clovertonmusic.com](http://clovertonmusic.com) for additional details and to hear more.

# NASW-MD's First Annual Ocean City Conference

Friday and Saturday,  
May 4-5, 2018  
Dunes Manor Hotel

For more info  
and to register

[Click Here](#)



**This Inaugural Ocean City Conference will begin with A Day of Ethics with Frederic Reamer, on Friday, May 4th. Dr. Reamer is well known in the social work world and is one of the key contributors to the new NASW Code of Ethics (which became effective on January 1, 2018) and the new technology standards recently coproduced by NASW, CSWE, ASWB, and CSWA. He will headline this two day event with two workshops on the first day. The morning, workshop is entitled Ethical Issues in the Digital Age: Essential Knowledge for Social Workers. Lunch will be provided at Dunes Manor, followed by the afternoon workshop, Boundary Issues and Dual Relationships in Social Work: Complex Ethical and Risk Management Issues. On Day two of the conference, representatives from the Worcester County Health Department will lead two workshops: the morning workshop, entitled The Opioid Epidemic Response and Narcan Training for Social Workers followed by lunch and an afternoon session, The Effects of Trauma and Chronic Stress.**

# Children's Mental Health Awareness Day

## PARTNERING FOR HEALTH AND HOPE



Please Join Us!  
Thursday, May 10, 2018  
9am-12p  
Judy Center  
1405 Glasgow St  
Cambridge, MD 21613

**Door  
Prizes!!!**

For Information and Registration  
Contact:  
Omeaka Jackson  
Omeaka@harvestinghopeinc.org  
Bernadette Townsend  
btownsend@mdcoalition.org

Behavioral Management  
Brittany Cooper, LCSW-C  
Crisis Response  
Carol Masden, LCSW-C  
Expressive Arts  
other resources!  
**Lunch provided!**

Presented by:



*You are Invited*

***CARE GIVER SUPPORT GROUP***

**WHEN:** (First Monday of the Month)

*Mondays 12:30- 1:30*

**WHERE:** *Caroline Medical Adult Day Care*

*Dining Room*

*403 S. 7th St. Denton Md.*

**More Information**

**Please Call 410-479-8065**

Would like to have your input regarding your interest in a Caregiver Support Group and what would be of importance to you and your love-one. How could you benefit from a support group? Please let us know your thoughts on the subject.

Carole Friend 410-479-8065 ext.8068



## PROVIDER ALERT

### SYSTEMS AVAILABILITY – 04/19/18

**APRIL 16, 2018**

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**Beacon** Health Options ProviderConnect System will be unavailable on: Thursday, April 19, 2018 from 08:00 PM (ET) until Thursday, April 19, 2018 at 9:30 PM (ET) for scheduled system improvements. No impact is expected.

Clinical services will be available for consumer crisis calls and urgent provider pre-certifications via the **Beacon** Health Options telephone number, [1-800-888-1965](tel:1-800-888-1965).

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Provider Alerts can be viewed online by clicking on the following link:

[http://maryland.beaconhealthoptions.com/provider/prv\\_alerts.html](http://maryland.beaconhealthoptions.com/provider/prv_alerts.html).

Provider Alerts typically published to the website within 10 business days.

See what's happening on our social sites



Thank you for reading!

For future submissions to our newsletter please email me directly at [lpollard@midshorebehavioralhealth.org](mailto:lpollard@midshorebehavioralhealth.org)

See you next week!

As always, we hope this newsletter has encompassed useful resources from our region.

About MSBH:

“The most important core value of our organization is hope: The belief that resiliency and recovery are real provides the essential and motivating message of a better future – that people and communities can, and do, overcome the internal and external challenges, barriers, and obstacles that confront them in order to achieve wellness.”

