Perelman School of Medicine
University of Pennsylvania

HeadsUp

11th Annual

Pennsylvania Early Psychosis Conference

Week 1
November 16-20
Focusing on Coordinated Specialty Care (CSC) in First Episode Psychosis (FEP)

11/16/2026
Hybrid (In-Person/Virtual) for PA FEP &
Virtual for non-PA FEP via Zoom Events

11/18/2026–11/20/2026
Virtual Sessions
Via Zoom Events

Week 2
December 14-18
Focusing on Recovery-Oriented Cognitive Therapy (CT-R)

12/14/2026–12/18/2026
Virtual Sessions
Via Zoom Events

Pennsylvania
Department of Human Services
Office of Mental Health and Substance Abuse Services

HeadsUp

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Email questions to Crystal Vatza,
HeadsUp Education and Telehealth Manager
at: crystal.vatza@pennmedicine.upenn.edu

Pennsylvania
Department of Human Services
Office of Mental Health and Substance Abuse Services

Pennsylvania Early Psychosis Conference

The HeadsUp Annual Pennsylvania Early Psychosis Conference offers professionals and practitioners educational opportunities in early psychosis treatment and services. Through an intensive overview of early psychosis and Coordinated Specialty Care (CSC), it offers an opportunity to strengthen skill sets, share best practices with colleagues, and implement new strategies, research and trends into practice. This year's conference will highlight important treatment aspects including evidence-based clinical treatment integration options, substance use, cultural sensitivity, ethical concerns, engagement, psychopharmacology, and Recovery-Oriented Cognitive Therapy (CT-R) for providers of First Episode Psychosis (FEP) care.

Conference/Series Learning Objectives

Through our robust learning program, and together with our thought leaders, we remain committed to:

- Promoting the development of innovative and responsive services in Coordinated Specialty Care (CSC) programs.
- Improving the overall quality of services delivered and increasing the competencies of clinicians and CSC team members.
- Assisting organizations and practitioners with the vision, knowledge, and skills needed to shape emerging and existing CSC teams, as well as support our mission.
- Educating and increasing the competencies of clinicians regarding cultural humility, ethical awareness, and suicide/crisis safety.
- Enhancing understanding and supporting the use of research obtained from the CSC teams and participants.

Accreditation and Designation of Credit

In support of improving patient care, Penn Medicine is jointly accredited by the Accreditation Council for Continuing Medical Education (ACCME), the Accreditation Council for Pharmacy Education (ACPE), and the American Nurses Credentialing Center (ANCC), to provide continuing education for the healthcare team.

- **Physicians:** Penn Medicine designates this live activity for a maximum of up to *40 AMA PRA Category 1 Credits*™. Physicians should claim only the credit commensurate with the extent of their participation in the activity.
- **Nurses:** This program provides up to 40 NCPD hours.
- **Pharmacists:** This Knowledge-Based (K) activity is approved for up to 40 ACPE contact hours of Continuing pharmacy education credit JA0000324-0000-26-053-L05-P.
- **Physician Assistants:** Penn Medicine has been authorized by the American Academy of PAs (AAPA) to award AAPA Category 1 CME credit for activities planned in accordance with the AAPA CME Criteria. This activity is designated for up to 40 AAPA Category 1 CME credits. PAs should only claim credit commensurate with the extent of their participation.
- **Psychologists:** Continuing Education (CE) credits for psychologists are provided through the co-sponsorship of the American Psychological Association (APA) Office of Continuing Education in Psychology (CEP). The APA CEP Office maintains responsibility for the content of the programs. This activity awards up to 40 credits for Psychologists.
- **Social Workers:** Penn Medicine is approved as an ACE provider to offer social work continuing education by the Association of Social Work Boards (ASWB) Approved Continuing Education (ACE) program. Regulatory boards are the final authority on courses accepted for continuing education credit. Social workers completing this course receive 40 general continuing education credits.
- **Patient Safety/Risk Management:** The program is approved for up to 40 hours of PS/RM credit.

Continuing Education Credits (CE/CMEs):

There is no cost to obtain CE/CMEs. To earn credits, participants must: log in on time, remain active throughout the duration of the session/scheduled end time, and complete both the evaluation and attestation for each session for which CE/CMEs are requested. No partial CE/CMEs will be awarded.

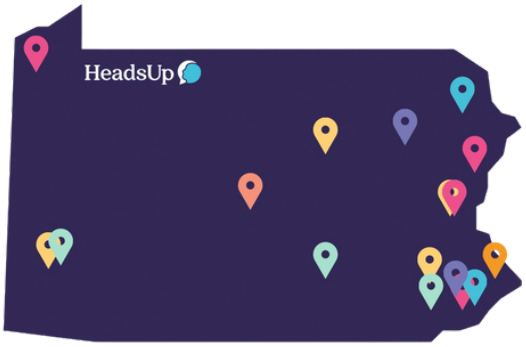
Equal Opportunity & Nondiscrimination Statement:

The University of Pennsylvania seeks talented students, faculty and staff with a wide variety of backgrounds, experiences, and perspectives. The University of Pennsylvania does not discriminate on the basis of race, color, sex, sexual orientation, religion, creed, national origin (including shared ancestry or ethnic characteristics), citizenship status, age, disability, veteran status or any other class protected under applicable federal, state or local law in the administration of its admissions, financial aid, educational or athletic programs, or other University-administered programs or in its employment practices. Questions or complaints regarding this policy should be directed to the Executive Director of the Office of Equal Opportunity Programs; Franklin Building, 3451 Walnut Street, Suite 421, Philadelphia, PA 19104-6106; or (215) 898-6993 (Voice).

Due to privacy and security risks associated with virtual meeting assistants, AI assisted tools, such as, but not limited to, recording bots and AI note takers, will not be permitted to join any HeadsUp virtual meetings or trainings. If a virtual meeting assistant is detected, meetings/trainings will be paused until it is removed.

Special needs requests must be made in writing no less than 14 days prior to the start date of the event.

For information or questions regarding speaker financial relationships, privacy and security protocols, special needs requests, or the equal opportunity and nondiscrimination statement, please contact event coordinator, Crystal Vatza, at **crystal.vatza@pennmedicine.upenn.edu**.



Expanding early psychosis care in Pennsylvania, together.

11th Annual PA Early Psychosis Conference Schedule

Week one of two

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WEEK 1: Coordinated Specialty Care (CSC) in First Episode Psychosis (FEP)

	Monday, November 16	Tuesday, November 17	Wednesday, November 18	Thursday, November 19	Friday, November 20
9:00-10:00 ET	**History and Current Status of FEP Care - 2026** Monica Calkins, PhD **Intended Audience:** **All CSC Staff**	Travel Day, No Programing	**Using the CSC Spirit to Connect with New Program Participants** Melanie Bennett, PhD, Krissa Rouse, MA, LCPC, & Jessica Engel, CPRS **Intended Audience:** **All CSC Staff**	**Intro to CSC Model: Core Competencies and Team Roles** Nina Koch, MSS, LSW **Intended Audience:** **Less than 1-Year in CSC/ FEP Staff**	**Introduction to Screening and Differential Diagnosis in CSC PT 1** *Christie Kelly, MA, LPC* **Intended Audience:** **Less than 1-Year in CSC/ FEP Staff**
			Diagnosis, Medical Monitoring & Medication Side Effects in FEP PT 1 *Joshua Riley, MD, PhD* **Intended Audience:** **Psychiatric Care Provider Staff**	**Redefining Community Participation After COVID-19: Young Adults' Perspectives and Implications for Mental Health Practice** Elizabeth Thomas, PhD, Alicia Lucksted, PhD, Mei Elizabeth Pearlstein, BS, Kristin Rivera, Davy Yue, Joshua Calarino, CRPS **Intended Audience:** **More than 1-Year in CSC/ FEP & Psychiatric Care Provider Staff**	**Application of the Stages of Change for Clinicians** Kris Wright, LCPC **Intended Audience:** **More than 1-Year in CSC/ FEP & Psychiatric Care Provider Staff**
					Psychosis Education and Support in Schools Melissa Nelson, EdD **Intended Audience:** **SEES/ CMs & CPS**
10:00-10:15 ET			**Break**		
10:15-11:15 ET	**First Episode Behind the Walls: The Intersection between FEP and the Criminal Justice System** Mark Morales, MD **Intended Audience:** **All CSC Staff**		**Reimagining Psychosis Recovery: Connection, Meaning, and a Path to a Values-Based Life** Jennifer Gerlach, LCSW **Intended Audience:** **All CSC Staff**	**Promoting Success and Participation in Community Living for Legally-Involved Young Adults: Risk-Need-Responsivity** Gina Vincent, PhD & Spencer G. Lawson, PhD **Intended Audience:** **All CSC Staff**	**Introduction to Screening and Differential Diagnosis in CSC PT 2** Christie Kelly, MA, LPC **Intended Audience: Less than 1-Year in CSC/ FEP Staff**
			Diagnosis, Medical Monitoring & Medication Side Effects in FEP PT 2 *Joshua Riley MD, PhD* **Intended Audience:** **Psychiatric Care Provider Staff**		**LGBTQ+ Identity and Psychotic Disorders: Implications for Clinical Practice PT 1** Maggie Manges, PhD **Intended Audience: More than 1-Year in CSC/ FEP & Psychiatric Care Provider Staff**
					Leveraging HYPE to Increase Engagement in Coordinated Specialty Care Michelle Mullen, PhD **Intended Audience: SEES & CMs**
					Application of the Stages of Change for Peer Specialists Kris Wright, LCPC **Intended Audience: CPS**
11:15-12:15 ET			**Lunch**		
12:15-1:15 ET	**The Ghost in the Machine: Psychosis in the Age of Artificial Intelligence** Alex Miller, MD, MSEd **Intended Audience:** **All CSC Staff**		**New Products, Familiar Risks: Addressing Nicotine Addiction in a Changing Environment** Frank Leone, MD **Intended Audience:** **All CSC Staff**	**Overview of the Stages of Change** Kris Wright, LCPC **Intended Audience:** **All CSC Staff**	**Introduction to Screening and Differential Diagnosis in CSC PT 3** Christie Kelly, MA, LPC **Intended Audience:** **Less than 1-Year in CSC/ FEP Staff**
					LGBTQ+ Identity and Psychotic Disorders: Implications for Clinical Practice PT 2 Maggie Manges, PhD **Intended Audience: More than 1-Year in CSC/ FEP & Psychiatric Care Provider Staff**
			Benefits and Uses of the Computerized Neurocognitive Battery (CNB) for Prescribers Christian Kohler, MD **Intended Audience:** **Psychiatric Care Provider Staff**		**Application of the Stages of Change for SEES and Case Managers** Kris Wright, LCPC **Intended Audience: SEES & CMs**
					Supporting the Young Adult Peer Support Workforce: Insights from a Survey Study Elizabeth, Thomas, PhD & Haley Payne, MA **Intended Audience: Peer Specialists**
1:15-1:30 ET			**Break**		
1:30-2:30 ET	**Ethics & Strategies Regarding the Stigmatization of Psychosis PT 1** Alicia Lucksted, PhD **Intended Audience:** **All CSC Staff**		**Learning Photography as a Mindfulness Practice** Presenter: Aaron Richter, BJ, BA & Andrea Silverman, MSW, LCSW **Intended Audience:** **All CSC Staff**	**CSC Model Implementation: Monitoring PT 1** Arielle Ered, PhD **Intended Audience:** **Less than 1-Year in CSC/ FEP Staff**	**The CARE Training - Suicide Prevention with The Trevor Project PT 1** Phii Regis, MPS **Intended Audience:** **All CSC Staff**
			Controversies Regarding Antipsychotic Medications PT 1 Christian Kohler, MD & Daniel Wolf, MD, PhD **Intended Audience:** **Psychiatric Care Provider Staff**	**The Whole Team Approach to Reducing Stress and Strengthening Team Cohesion PT 1** Amanda Fooks, LCSW, Alison Swigart, MD, Keith Karabin, MSCC, LPC, Joscelyn Cura, BA, & Nicole Kastner, CPS **Intended Audience:** **More than 1-Year in CSC/ FEP & Psychiatric Care Provider Staff**	
2:30-2:45 ET			**Break**		
2:45-3:45 ET	**Ethics & Strategies Regarding the Stigmatization of Psychosis PT 2** Alicia Lucksted, PhD **Intended Audience:** **All CSC Staff**		**Introduction to Psychopharmacology in FEP for Non-Prescribers** *Andreea Temelie, PharmD, BCPP* **Intended Audience:** **Less than 1-Year in CSC/ FEP Staff**	**CSC Model Implementation: Monitoring PT 2** Arielle Ered, PhD **Intended Audience:** **Less than 1-Year in CSC/ FEP Staff**	**The CARE Training - Suicide Prevention with The Trevor Project PT 2** Phii Regis, MPS **Intended Audience:** **All CSC Staff**
			Advanced Psychopharmacology for Non-Prescribers: Antidepressants, Mood Stabilizers & Stimulants in FEP *Melanie Yabs, PharmD, MS, BCPP* **Intended Audience: More than 1-Year in CSC/ FEP**	**The Whole Team Approach to Reducing Stress and Strengthening Team Cohesion PT 2** Amanda Fooks, LCSW, Alison Swigart, MD, Keith Karabin, MSCC, LPC, Joscelyn Cura, BA, & Nicole Kastner, CPS **Intended Audience:** **More than 1-Year in CSC/ FEP & Psychiatric Care Provider Staff**	
			Controversies Regarding Antipsychotic Medications PT 2 Christian Kohler, MD & Daniel Wolf, MD, PhD **Intended Audience:** **Psychiatric Care Provider Staff**		

Perelman School of Medicine, University of Pennsylvania

Visit the Annual Conference section of the Education & Training page on the HeadsUp website for more information on presentation content and presenters

Email questions to Crystal Vatza, HeadsUp Education and Telehealth Manager at: crystal.vatza@pennmedicine.upenn.edu

11th Annual PA Early Psychosis Conference Schedule Week two of two

HeadsUp

WEEK 2: Recovery-Oriented Cognitive Therapy (CT-R)

	Monday, December 14	Tuesday, December 15	Wednesday, December 16	Thursday, December 17	Friday, December 18
9:00-11:00 ET	**Recovery-Oriented Cognitive Therapy PT 1** Aaron Brinen, PsyD **Intended Audience: All CSC Staff**		**Recovery-Oriented Cognitive Therapy PT 4** Aaron Brinen, PsyD **Intended Audience: All CSC Staff**	**Recovery-Oriented Cognitive Therapy PT 6** Aaron Brinen, PsyD **Intended Audience: All CSC Staff**	**Recovery-Oriented Cognitive Therapy PT 8** Aaron Brinen, PsyD **Intended Audience: All CSC Staff**
9:30-11:00 ET	**Adapting Recovery-Oriented Cognitive Therapy for Prescribers and Applying the Approach** Elisa Nelson, PhD **Intended Audience: Psychiatric Care Provider Staff**	**Adapting Recovery-Oriented Cognitive Therapy for Families and Applying the Approach** Elisa Nelson, PhD **Intended Audience: All CSC Staff**	**Adapting Recovery-Oriented Cognitive Therapy for Peer Specialists and Applying the Approach** Elisa Nelson, PhD **Intended Audience: Peer Specialists**	**Adapting Recovery-Oriented Cognitive Therapy for Supported Employment and Education Specialists & Case Managers** Elisa Nelson, PhD **Intended Audience: SEES/CMs**	
11:00-11:30 ET	**Break**				
11:30-1:30 ET	**Recovery-Oriented Cognitive Therapy PT 2** Aaron Brinen, PsyD **Intended Audience: All CSC Staff**	**Recovery-Oriented Cognitive Therapy PT 3** Aaron Brinen, PsyD **Intended Audience: All CSC Staff**	**Recovery-Oriented Cognitive Therapy PT 5** Aaron Brinen, PsyD **Intended Audience: All CSC Staff**	**Recovery-Oriented Cognitive Therapy PT 7** Aaron Brinen, PsyD **Intended Audience: All CSC Staff**	**Recovery-Oriented Cognitive Therapy PT 9** Aaron Brinen, PsyD **Intended Audience: All CSC Staff**

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Thank you to our funders, organizers, & presenters who help keep this collaborative training relevant and dynamic. We look forward to continuing to help serve our Pennsylvania early psychosis community together!

Pennsylvania
Department of Human Services
Office of Mental Health and Substance Abuse Services

WEEK 1: Coordinated Specialty Care in First Episode Psychosis

November 16-20

Session Descriptions

Monday, November 16

History and Current Status of First Episode Psychosis (FEP) Care 2026

Monica Calkins, PhD
9:00-10:00 AM ET

The Coordinated Specialty Care (CSC) model is the foundation of Pennsylvania's First Episode Psychosis (PA FEP) programs. This course provides an overview of the history of, and recent developments in, CSC and introduces the core components and stakeholders of the model. Recent advances in the Connection Learning Healthcare System hub of the national Early Psychosis Intervention Network (EPINET) collaborative will be reviewed along with their implications for growing our learning healthcare system for early psychosis care.

Objectives:

1. Describe three or more challenges faced in the effort to identify and intervene early in the course of psychosis disorders
2. Identify at least two benefits of CSC care for individuals with psychosis as suggested by research in this area
3. List two key recent findings from Connection Learning Healthcare System and their relevance to clinical care

Inteded Audience: All CSC staff encouraged to attend

First Episode Behind the Walls: The Intersection between First Episode Psychosis (FEP) and the Criminal Justice System

Mark Morales, MD
10:15-11:15 AM ET

This session will provide an overview of the intersection between first episode psychosis and the criminal justice system, highlighting the ways in which incarceration can affect patients throughout the course of their treatment and recovery. The nature and limitations of psychiatric services available inside correctional facilities will be discussed, and the session will describe additional elements of history that can be helpful to gather for justice-involved patients. Strategies for supporting patients who become justice-involved and advocating on their behalf will also be discussed.

Objectives:

1. List at least three different elements of history that can be helpful to obtain for patients who have been incarcerated
2. Describe at least two unique care considerations that may affect how justice-involved patients interact with FEP programs
3. Identify two local connections that can serve as resources if a program participant becomes involved in the criminal justice system

Intended Audience: All CSC staff encouraged to attend

The Ghost in the Machine: Psychosis in the Age of Artificial Intelligence

Alexandra (Alex) Miller, MD, MSEd
12:15-1:15 PM ET

As generative Artificial Intelligence (AI) becomes more accessible and persuasive, clinicians are increasingly encountering patients whose interactions with AI systems influence their thinking, behavior, and relationships. This session examines the emerging phenomenon of AI psychosis, including its proposed mechanisms, epidemiology, and potential risk factors.

Drawing on case studies and examples from the media and from the scientific literature, participants will examine the phenomenon of AI psychosis within the context of the broader mental health consequences of digital technology use and misuse. The session will explore how certain features of AI-human interaction may amplify existing vulnerabilities, while highlighting lessons mental health providers can draw from these encounters about validation, trust, and communication.

The session will conclude with practical guidance for counseling youth and other vulnerable populations about safe and responsible technology use, helping patients navigate an increasingly complex digital landscape.

Objectives:

1. Describe the current evidence on the emerging phenomenon of AI psychosis, including proposed mechanisms and risk factors
2. Compare and contrast the phenomenon of AI psychosis with other mental health consequences of digital technology use and misuse
3. Formulate insights that mental health providers can learn from the bidirectional engagement between humans and large language models
4. Apply principles of safe and developmentally appropriate digital media use to counsel youth and other high-risk populations

Intended Audience: All CSC staff encouraged to attend

Monday, November 16

Ethics & Strategies Regarding the Stigmatization of Psychosis PT 1

Alicia Lucksted, PhD
1:30-2:30 PM ET

The stigmatization of psychosis (and related experiences) is common, profound, and harmful. This creates both practical and ethical concerns for CSC teams and others assisting young people (and others) experiencing psychosis and their family members. It also impacts "providers" directly and indirectly. This workshop will discuss relevant knowledge about stigmatization regarding mental health and psychosis specifically, especially pertinent ethical principles and dilemmas, and a range of intervention strategies for different situations. It will also offer participants ways to apply some of these strategies in the moment to their unique situations and roles, and offer resources they may find useful beyond the workshop.

Objectives:

1. Apply core ethical principles to the problem of stigmatization of psychosis and CSC services
2. Assess how current knowledge about the effects of stigma & psychosis affect their work and intervention strategies
3. Apply relevant strategies to the stigma-related dilemmas and concerns they face

Intended Audience: All CSC staff encouraged to attend

Ethics & Strategies Regarding the Stigmatization of Psychosis PT 2

Alicia Lucksted, PhD
2:45-3:45 PM ET

The stigmatization of psychosis (and related experiences) is common, profound, and harmful. This creates both practical and ethical concerns for CSC teams and others assisting young people (and others) experiencing psychosis and their family members. It also impacts "providers" directly and indirectly. This workshop will discuss relevant knowledge about stigmatization regarding mental health and psychosis specifically, especially pertinent ethical principles and dilemmas, and a range of intervention strategies for different situations. It will also offer participants ways to apply some of these strategies in the moment to their unique situations and roles, and offer resources they may find useful beyond the workshop.

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3. Apply relevant strategies to the stigma-related dilemmas and concerns they face

Intended Audience: All CSC staff encouraged to attend

Tuesday, November 17 TRAVEL DAY NO PROGRAMMING

WEEK 1: Coordinated Specialty Care in First Episode Psychosis

November 16-20

Session Descriptions

Wednesday, November 18

Using the Coordinated Specialty Care (CSC) Spirit to Connect with New Program Participants
Melanie Bennett, PhD, Krissa Rouse, MA, LCPC, & Jessica Engel, CPRS
9:00-10:00 AM ET
The first few meetings between new participants and CSC providers are a critical time that can impact later program engagement. In this session, we will lead a discussion of communicating the CSC Spirit - recovery is possible, decision making is truly shared, attending to the whole person, and supporting/empowering families – from the very start of CSC. Presenters will also offer ways to integrate different approaches to understanding psychosis into the early days of CSC so that new participants can find something in CSC that resonates with them.

Objectives:
1. Review factors that support participation in CSC
2. Discuss ways that CSC programs can integrate these factors into their space and practice
3. Identify strategies for providers and programs to support CSC participation at the start of treatment

Intended Audience: All CSC staff encouraged to attend

Diagnosis, Medical Monitoring, and Medication Side Effects in First Episode Psychosis (FEP), PT 1
Joshua Riley, MD, PhD
9:00-10:00 AM ET
Pennsylvania's First Episode Psychosis (PA FEP) Centers support a broad range of young individuals experiencing psychosis. Many of these individuals will have had some history of emotional and mental distress prior to presenting to our programs and often have received treatment for other disorders in the past. Diagnosis can be difficult and the number of potential medical etiologies for new psychotic symptoms makes monitoring and medication critical. This course for prescribers provides an overview of diagnosis, examines aspects of phenomenology that can assist with differential diagnosis, discusses the role of laboratory and imaging investigations in the workup, and dives into particularly important aspects of medical monitoring, medication adverse effects, and pharmacological treatment considerations for individuals experiencing psychosis of recent onset.

Objectives:
1. Understand the variety of ways a first episode of psychosis may initially present in a clinical setting
2. Delineate an approach to evaluate and rule out medical etiologies of first episode psychosis and indications for more intensive testing
3. Evaluate common presentations of non-psychotic psychiatric symptoms that may occur in the context of first episode psychosis, and how to approach treatment of these symptoms
4. Identify dosing strategies for antipsychotics in patients with FEP

Intended Audience: Psychiatric Care Provider Staff

Registration information is available on the education and training PAGE of our our website: headsup-pa.org

Wednesday, November 18

Reimagining Psychosis Recovery: Connection, Meaning, and a Path to a Values-Based Life
Jennifer Gerlach, LCSW
10:15-11:15 AM ET
Psychosis is more than a set of symptoms---it can reshape a young person's sense of self, relationships, and direction in life. In this session, we will explore the experience of psychosis as well as practical strategies drawn from Acceptance and Commitment Therapy to assist individuals in creating a values-based path for the future. The speaker will share from both her clinical experience as a therapist and her lived experience as a person in mental health recovery.

Objectives:
1. Identify three ways psychosis can affect a young person's growing sense of self and relationships
2. Implement two tools for assisting program participants in identifying values and life goals
3. Gather two skills for accompanying program participants as they make sense of their experience of psychosis
4. Gather tool tools for assisting program participants in rebuilding their social circles
5. Identify strategies to support meaning making without invalidating experiences during psychosis
6. Gather an overall strategy to collaborate with program participants to take steps towards recovery

Intended Audience: All CSC staff encouraged to attend

Diagnosis, Medical Monitoring, and Medication Side Effects in First Episode Psychosis (FEP), PT 2
Joshua Riley, MD, PhD
10:15-11:15 AM ET
Pennsylvania's First Episode Psychosis (PA FEP) Centers support a broad range of young individuals experiencing psychosis. Many of these individuals will have had some history of emotional and mental distress prior to presenting to our programs and often have received treatment for other disorders in the past. Diagnosis can be difficult and the number of potential medical etiologies for new psychotic symptoms makes monitoring and medication critical. This course for prescribers provides an overview of diagnosis, examines aspects of phenomenology that can assist with differential diagnosis, discusses the role of laboratory and imaging investigations in the workup, and dives into particularly important aspects of medical monitoring, medication adverse effects, and pharmacological treatment considerations for individuals experiencing psychosis of recent onset.

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Intended Audience: Psychiatric Care Provider Staff

WEEK 1: Coordinated Specialty Care in First Episode Psychosis

November 16-20

Session Descriptions

Wednesday, November 18

New Products, Familiar Risks: Addressing Nicotine Addiction in a Changing Environment
Frank Leone, MD
12:15-1:15 PM ET
This presentation: explores how the rapidly shifting modern tobacco landscape, characterized by evolving products like flavored e-cigarettes, synthetic nicotine, and nicotine pouches, continues to drive nicotine addiction; analyzes the public health impact of these items, specifically detailing how marketing, social media trends, and shifting regulatory policies influence patient exposure and vulnerability to psychotic events; shifts the clinical perspectives on cessation by reframing pharmacotherapy as a means of reducing the compulsive drive to smoke; and reviews the utility and safety of medications like varenicline, bupropion, and nicotine replacements (such as nicotine patch, gum, lozenges, and nasal sprays). Ultimately, the talk helps providers update their strategies, and explore resources that help busy clinicians integrate tobacco treatment directly into clinical practice.

Objectives:
1. Review environmental developments that influence your program participant's nicotine exposure and experience
2. Discuss the utility of medications in helping people feel less compelled to continue smoking
3. Identify available resources aimed at facilitating tobacco integration into practice

Intended Audience: All CSC staff encouraged to attend

Benefits and Uses of the Computerized Neurocognitive Battery (CNB) for Prescribers
Christian Kohler, MD
12:15-1:15 PM ET
Cognitive limitations are common in persons who experience psychosis with consequences in both acute phase and chronic treatment. This session will review the commonly used Computerized Neurocognitive Battery (CNB), specifically created for use in the psychosis population, which looks at multiple domains of cognitive functioning. It will focus on how to include the results of CNB testing in clinical management and plans for functional improvement.

Objectives:
1. Name the five different cognitive domains examined by the CNB
2. Discuss how to use results of the CNB in clinical management
3. Explain how to focus on the strengths of the person to develop a personalized recovery plan

Intended Audience: Psychiatric Care Provider Staff

Wednesday, November 18

Learning Photography as a Mindfulness Practice
Aaron Richter, BJ, BA & Andrea Silverman, MSW, LCSW
1:30-2:30 PM ET
Today we make pictures of everything. We snap selfies and fit-pics. We document meals, pets, vacations and birthdays. To many, photographs are our proof — proof that our meal was tasty; proof that the sunset was stunning; proof that our outfit was fire; proof that our cat was cute; proof that we, simply, were there. Photography, facilitated through the camera phones in our pockets, has become a regular everyday part of how we experience the world.

This presentation will introduce the core concepts and activities within Learning Photography as a Mindfulness Practice (LPMP), a training in development by professional photographer and Temple University MSW student Aaron Richter. LPMP teaches strategies for incorporating photography — using the camera phone — into a therapeutic process with our participants. Aaron will lead attendees through beginning to consider how we look at and talk about photographs. We will orient ourselves toward seeing the world through our camera phones and learn to recognize some basic elements of the photograph. We will consider activities for sparking engagement with participant while also bridging the gap toward developing picture-making as a tool for expression and storytelling. Attendees are encouraged to join this session with open eyes and a curious mind.

Objectives:
1. Describe your responses to seeing pictures using the fundamental elements of the photograph
2. Differentiate between the photograph as a document versus the photograph as an expression
3. Identify areas within your own practice where photography can be used with participants as a tool for mindfulness and self-expression

Intended Audience: All CSC staff encouraged to attend

Controversies Regarding Antipsychotic Medications, PT 1
Christian Kohler, MD & Daniel (Dan) Wolf, MD, PhD
1:30-2:30 PM ET
This session will focus on commonly accepted understandings of antipsychotic medications and their uses in first episode psychosis treatment. We will critically review the published evidence pertaining to dopamine super-sensitivity psychosis, deprescribing (stopping vs lowering dose vs keeping the same), pharmacogenomic testing, starting long-acting injectable (LAI) medications immediately at first onset, and starting clozapine immediately, early or after one medication failure and antipsychotic polypharmacy.

Objectives:
1. Analyze current peer-reviewed published literature regarding commonly accepted understandings of antipsychotic medication use in first episode psychosis treatment
2. Evaluate the evidence base of accepted guidelines/ constructs of early psychosis pharmacological treatment
3. Compare alternate strategies for use of antipsychotic medications in early psychosis treatment

Intended Audience: Psychiatric Care Provider Staff

WEEK 1: Coordinated Specialty Care in First Episode Psychosis

November 16-20

Session Descriptions

Wednesday, November 18

Introduction to Psychopharmacology in First Episode Psychosis (FEP) for Non-Prescribers
Andreea Temelie, PharmD, BCPP
2:45-3:45 PM ET
National guidelines for the treatment of schizophrenia recommend the creation of a comprehensive, person-centered treatment plan that includes evidence-based pharmacologic and nonpharmacologic treatments. The goal of this treatment is to minimize the duration of untreated psychosis; however, psychopharmacology in First Episode Psychosis (FEP) can offer unique challenges. Medication management can be complex when it comes to different psychotropic drug classes, their varying mechanisms, and their side effects. This course provides an overview of key considerations for non-prescribing Coordinated Specialty Care team members regarding medication treatment.

Objectives:
1. Define the role of psychopharmacological care for FEP program participants
2. Identify medication response timeline in FEP
3. Understand the various medications and formulations that may be used in FEP
4. Recognize medication-related side effects relevant to the FEP population

Intended Audience: Less than 1-Year in CSC / FEP Staff

Advanced Psychopharmacology for Non-Prescribers: Antidepressants, Mood Stabilizers and Stimulants in FEP
Melanie Yabs, PharmD, MS, BCPP
2:45-3:45 PM ET
Psychopharmacology in First Episode Psychosis (FEP) offers unique challenges. Medication management can be complex for our patient population when it comes to the different psychotropic drug classes, their varying mechanisms, and their side effects. This course provides an overview of key considerations for non-prescribing Coordinated Specialty Care team members regarding the use of antidepressants, mood stabilizers, and stimulants in conjunction with antipsychotic medication treatment.

Objectives:
1. Recognize psychotropic medications that may be used in conjunction with antipsychotic medication treatment
2. Identify the benefits of these psychotropic medications in the treatment of patients experiencing FEP
3. Recall side effects associated with certain psychotropic medications
4. Understand the clinical consequences of medication self-discontinuation

Intended Audience: More than 1-Year in CSC / FEP Staff

Wednesday, November 18

Controversies Regarding Antipsychotic Medications, PT 2
Christian Kohler, MD & Daniel (Dan) Wolf, MD, PhD
2:45-3:45 PM ET
This session will focus on commonly accepted understandings of antipsychotic medications and their uses in first episode psychosis treatment. We will critically review the published evidence pertaining to dopamine super-sensitivity psychosis, deprescribing (stopping vs lowering dose vs keeping the same), pharmacogenomic testing, starting long-acting injectable (LAI) medications immediately at first onset, and starting clozapine immediately, early or after one medication failure and antipsychotic polypharmacy.

Objectives:
1. Analyze current peer-reviewed published literature regarding commonly accepted understandings of antipsychotic medication use in first episode psychosis treatment
2. Evaluate the evidence base of accepted guidelines/ constructs of early psychosis pharmacological treatment
3. Compare alternate strategies for use of antipsychotic medications in early psychosis treatment

Intended Audience: Psychiatric Care Provider Staff

Thursday, November 19

Introduction to the Coordinated Specialty Care (CSC) Model: Core Competencies and Team Roles
Nina Koch, MSS, LSW
9:00-10:00 AM ET
The Coordinated Specialty Care (CSC) model is the foundation of Pennsylvania's First Episode Psychosis (PA FEP) programs. This course describes in detail the core components and stakeholders of the model and focuses on the specifics of team roles/responsibilities. The session will focus on program competencies to develop an effective team.

Objectives:
1. Define the roles of each team member in a CSC model
2. Describe staff competencies for each discipline
3. Identify the importance of team cohesion

Intended Audience: Less than 1-Year in CSC / FEP Staff

WEEK 1: Coordinated Specialty Care in First Episode Psychosis

November 16-20

Session Descriptions

Thursday, November 19

Redefining Community Participation After COVID-19: Young Adults' Perspectives and Implications for Mental Health Practice

Elizabeth Thomas, PhD, Alicia Lucksted, PhD, Mei Elizabeth Pearlstein, BS, Kristin Rivera, Davy Yue, & Joshua Calarino, CRPS

9:00-10:00 AM ET

Community participation, including involvement in work, education, recreation, spirituality, hobbies, identity spaces, civic engagement, and relationships, is an important part of building a meaningful life. However, young adults living with serious mental health conditions (SMHC) often face barriers that limit participation in the areas that matter most to them. The COVID-19 pandemic likely intensified many of these existing barriers, including poverty, stigma, limited access to opportunities and supports, and social exclusion, while contributing to greater reliance on digital and hybrid forms of participation.

This presentation will share findings from a community-engaged qualitative study conducted with young adults with lived expertise as partners throughout the research process. The study explored how 40 young adults living with SMHC define community and describe their experiences with community participation since COVID-19. Attendees will learn about the types of communities and participation activities young adults consider meaningful and how these insights can inform mental health practice. The presentation will highlight ways providers can better support young adults' personal goals and desires around community participation and expand opportunities for engagement in community life. Partners will highlight the importance of centering young adult voices in efforts to promote meaningful participation and reduce participation disparities.

Objectives:

1. Recognize how young adults living with serious mental health conditions define community and identify the types of participation activities that are meaningful to them
2. Identify key considerations for exploring young adults' community participation goals, preferences, and experiences as part of person-centered and recovery-oriented practice
3. Apply young adults' perspectives on community participation to identify strategies for supporting participation goals and expanding opportunities for meaningful engagement in community life

Intended Audience: More than 1-Year in CSC / FEP Staff

Thursday, November 19

Promoting Success and Participation in Community Living for Legally-Involved Young Adults: Risk-Need-Responsivity

Gina Vincent, PhD & Spencer G. Lawson, PhD

10:15–11:15 AM ET

Over the past few decades, a considerable amount of work has been devoted to investigating what does and does not work to reduce reoffending and violence in the community. Penal policies and practices that rely on retribution, deterrence, and incapacitation (e.g., mandatory sentences, three-strike laws, truth-in-sentencing legislation) are ineffective in promoting prosocial behavior, community participation, and public safety. These approaches can be particularly damaging for transition age youth (age 18 to 24) involved in the justice system living with serious mental health conditions. To the extent possible, legal, case management, and treatment decisions should be based on factors that are robustly related to crime and aggression and are amenable to alteration; namely, one's level of risk for reoffending and the changeable risk factors that appear to underlie that risk. This is known as the Risk-Needs-Responsivity (RNR) approach. RNR is an evidence-based strategy that is used widely in the legal system to inform policy and practice, but rarely in behavioral health systems where the principles still apply. This presentation will describe the RNR approach and how it can be applied and implemented within multiple community-based settings. The presenters will report findings from a study of barriers and facilitators to using RNR in two community-based state initiatives designed for reducing violence and future legal involvement among transition age youth living with behavioral health conditions.

Objectives:

1. Apply strategies to identify the risk of reoffending and assess primary risk factors among transition age youth
2. Identify four risk factors and four protective factors that matter most to risk of reoffending
3. List three possible solutions for effectively delivering Risk-Need-Responsivity in non-legal, community-based behavioral health settings

Intended Audience: All CSC staff encouraged to attend

Overview of the Stages of Change

Kris Wright, LCPC

12:15-1:15 PM ET

An overview of the Stages of Change model including matching effective processes of change to consumer's identified stage, working with individuals who are "more ready" to work on some goals than others, and problem-solving strategies for adapting work on common goals to move individuals through stages of change.

Objectives:

1. Describe key concepts of the Stages of Change Model including considerations for assessing Stage of Change in relation to goal areas
2. Match Interventions to Stages of Change using Processes of Change
3. List considerations for working with individuals who are at different stages of change in different goals areas

Intended Audience: More than 1-Year in CSC / FEP Staff

WEEK 1: Coordinated Specialty Care in First Episode Psychosis

November 16-20

Session Descriptions

Thursday, November 19

Introduction to Coordinated Specialty Care (CSC) Model Implementation: Monitoring, PT 1
Arielle Ered, PhD
1:30-2:30 PM ET
The Coordinated Specialty Care (CSC) model is the cornerstone of Pennsylvania's First Episode Psychosis (PA FEP) programs. This two-part course provides an overview of implementation and monitoring of the model, as well as practical guidance from a hands-on perspective.

Objectives:
1. Outline areas of strengths and weaknesses in current practice as related to the CSC model (e.g., fidelity to the model in current practice)
2. Review overall CSC clinic flow and operational structure
3. Identify the pros and cons of telehealth in CSC

Intended Audience: Less than 1-Year in CSC / FEP Staff

The Whole Team Approach to Reducing Stress and Strengthening Team Cohesion, PT 1
Amanda Fooks, LCSW, Alison Swigart, MD, Keith Karabin, MSCC, LPC, Joscelyn Cura, BA & Nicole Kastner, CPS
1:30-2:30 PM ET
This is a two-part session focused on supporting the CSC model implementation and care through reducing role stress by strengthening team cohesion. This interactive training will focus on the contagious effects of stress across teams, the chronic effects of stress on team dynamics and identify the specific stressors associated with each role on the team. Through discussion, role examples, and practical tools, teams will have the opportunity to identify internal stressors affecting their team members and the overall team dynamic while developing a team specific plan to address the identified stressors.

Objectives:
1. Understand how stress impacts individuals and teams
2. Recognize the shared responsibility for creating a healthy work environment
3. Identify team practices that reduce workplace stress
4. Develop concrete team commitments that promote resilience and cohesion

Intended Audience: More than 1-Year in CSC / FEP Staff

Introduction to Coordinated Specialty Care (CSC) Model Implementation: Monitoring, PT 2
Arielle Ered, PhD
2:45-3:45 PM ET
The Coordinated Specialty Care (CSC) model is the cornerstone of Pennsylvania's First Episode Psychosis (PA FEP) programs. This two-part course provides an overview of implementation and monitoring of the model, as well as practical guidance from a hands-on perspective.

Objectives:
1. Outline areas of strengths and weaknesses in current practice as related to the CSC model (e.g., fidelity to the model in current practice)
2. Review overall CSC clinic flow and operational structure
3. Identify the pros and cons of telehealth in CSC

Intended Audience: Less than 1-Year in CSC / FEP Staff

Thursday, November 19

The Whole Team Approach to Reducing Stress and Strengthening Team Cohesion, PT 2
Amanda Fooks, LCSW, Alison Swigart, MD, Keith Karabin, MSCC, LPC, Joscelyn Cura, BA & Nicole Kastner, CPS
2:45-3:45 PM ET
This is a two-part session focused on supporting the CSC model implementation and care through reducing role stress by strengthening team cohesion. This interactive training will focus on the contagious effects of stress across teams, the chronic effects of stress on team dynamics and identify the specific stressors associated with each role on the team. Through discussion, role examples, and practical tools, teams will have the opportunity to identify internal stressors affecting their team members and the overall team dynamic while developing a team specific plan to address the identified stressors.

Objectives:
1. Understand how stress impacts individuals and teams
2. Recognize the shared responsibility for creating a healthy work environment
3. Identify team practices that reduce workplace stress
4. Develop concrete team commitments that promote resilience and cohesion

Intended Audience: More than 1-Year in CSC / FEP Staff

Friday, November 20

Introduction to Screening and Differential Diagnosis in Coordinated Specialty Care (CSC), PT 1
Christie Kelly, MA, LPC
9:00-10:00 AM ET
Identifying individuals who meet enrollment criteria for our Pennsylvania First Episode Psychosis (PA FEP) Centers can be difficult, and the clinical picture continues to evolve in many young adults while participating in our programs. This three-part course offers an in-depth review of referral and screening, discusses the nuanced work of ongoing differential diagnosis, and provides an overview of relevant factors prior to the onset of psychotic disorders.

Objectives:
1. Describe the positive symptoms of psychosis
2. Identify at least three negative symptoms of psychosis
3. Identify at least two common environmental contributors to the development of psychotic disorders
4. Name and describe the utility of at least one screening measure for psychosis

Intended Audience: Less than 1-Year in CSC / FEP Staff

Application of the Stages of Change for Clinicians
Kris Wright, LCPC
9:00-10:00 AM ET
An interactive workshop applying Stages of Change theory work with individuals on goals in clinical settings. Blending didactic content with large and small group brainstorming, participants will practice and problem-solve using their empirically supported practice models in ways support individuals in moving through Stages of Change.

Objectives:
1. Recall brief review of States of Change and Processes of Change with examples of clinical goals and how individuals may present in various Stages of Change
2. Work with groups of providers who employ similar practice models to match tasks common to their practices with the individual's Stage of Change
3. Identify how selecting therapeutic tasks from your practice model to Stages and Processes of Change can facilitate movement through stages and towards goals achievement

Intended Audience: More than 1-Year in CSC / FEP Staff

WEEK 1: Coordinated Specialty Care in First Episode Psychosis

November 16-20

Session Descriptions

Friday, November 20

Psychosis Education and Support in Schools
Melissa Nelson, EdD
9:00-10:00 AM ET
School personnel are in a unique position to observe changes in students' behavior, thinking, emotional functioning, and academic performance over time. Yet, despite their ongoing contact with students, many educators have limited training in psychosis and may lack the knowledge or confidence to recognize emerging symptoms, understand their significance, or determine how to respond when concerns arise.

Research on school-based mental health and early psychosis identification highlights the importance of increasing awareness among school personnel and strengthening connections between educational settings and mental health services. However, recognizing potential psychosis in schools is complex. Without adequate knowledge and access to consultation, school personnel may misinterpret concerning changes, delay referrals, or struggle to navigate appropriate support pathways.

Bringing clinical expertise into conversation with the realities of school practice, this session will explore strategies for improving school personnel's understanding of psychosis and their capacity to respond effectively. The goal is to identify practical opportunities to bridge the gap between emerging clinical knowledge and educational practice, supporting earlier recognition, more informed responses, and stronger partnerships among schools, clinicians, students, and families.

Objectives:
1. Identify at least three documented knowledge, preparedness, or role-clarity gaps affecting school personnel's recognition of and response to students experiencing psychosis
2. Analyze research findings on psychosis education, early identification, and screening in educational settings to identify evidence-based opportunities for improving school-based practice
3. Evaluate at least two strategies for strengthening collaboration between school personnel and clinical professionals, including staff education, referral pathways, and coordinated student support

Intended Audience: SEES, CMs, & Peer Specialists

Introduction to Screening and Differential Diagnosis in Coordinated Specialty Care (CSC), PT 2
Christie Kelly, MA, LPC
10:15-11:15 AM ET
Identifying individuals who meet enrollment criteria for our Pennsylvania First Episode Psychosis (PA FEP) Centers can be difficult, and the clinical picture continues to evolve in many young adults while participating in our programs. This three-part course offers an in-depth review of referral and screening, discusses the nuanced work of ongoing differential diagnosis, and provides an overview of relevant factors prior to the onset of psychotic disorders.

Objectives:
1. Describe the positive symptoms of psychosis
2. Identify at least three negative symptoms of psychosis
3. Identify at least two common environmental contributors to the development of psychotic disorders
4. Name and describe the utility of at least one screening measure for psychosis

Intended Audience: Less than 1-Year in CSC / FEP Staff

Friday, November 20

LGBTQ+ Identity and Psychotic Disorders: Implications for Clinical Practice, PT 1
Margaret (Maggie) Manges, PhD
10:15-11:15 AM ET
Psychotic-spectrum disorders are globally considered to be one of the most disabling mental health conditions and are frequently associated with negative health outcomes, such as suicide. Like people with psychosis, LGBTQ+ youth and young people face increased risk for negative health outcomes. Despite this shared risk, little has been documented in research about the intersection of LGBTQ+ identity and psychosis. Further, little is known about how these experiences may impact the quality of care received in various healthcare settings. Thus, clinicians may feel as though they lack clear guidance in culturally competent assessment, conceptualization, and intervention for this vulnerable population.

This session will provide an integrated overview of our current knowledge on the intersection of LGBTQ+ identity and psychosis. We will specifically examine the complex roles of stress and discrimination for this population. A portion of the session will cover ongoing research examining the experiences of LGBTQ+ people with psychosis when receiving mental health care, as well as work with healthcare professionals, covering topics related to clinicians' experiences, confidence, practices, or attitudes when working with LGBTQ+ patients living with psychosis.

Objectives:
1. Describe the intersecting role of stress for both LGBTQ+ people and people living with psychosis
2. Identify ways that assessment, conceptualization, or treatment may be impacted by the intersection of LGBTQ+ identity and psychosis
3. Apply a culturally-informed lens to conversations about identity and experience with LGBTQ+ patients

Intended Audience: More than 1-Year in CSC / FEP Staff & Psychiatric Care Provider Staff

Registration information is available on the education and training page of our our website: headsup-pa.org

WEEK 1: Coordinated Specialty Care in First Episode Psychosis

November 16-20

Session Descriptions

Friday, November 20

Leveraging HYPE to Increase Engagement in Coordinated Specialty Care (CSC)
Michelle Mullen, PhD
10:15-11:15 AM ET
Education and employment are central to discovery and a successful transition to adulthood, yet many young adults receiving coordinated specialty care (CSC) are not fully engaged in career services. One challenge is that providers often lack structured tools to guide conversations that move beyond whether a young adult wants to work or attend school to understanding the factors influencing change and engagement. Without this information, services can become either reactive, responding to the "crisis of the week" or disengagement, rather than intentionally supporting identification of and progress toward meaningful goals.

This session introduces Helping Youth on the Path to Employment (HYPE), a comprehensive career development approach designed for young adults living with mental health conditions, and its framework for developing intentional career services. Participants will explore how stages of change interact with factors that influence motivation, commitment, and awareness, and how understanding these dimensions can help providers identify targeted interventions that strengthen engagement in education and employment services.
The session will feature HYPE's Factors Associated with Change Assessment (FACA), a semi-structured conversational tool that helps providers and young adults explore these factors, develop a shared understanding of what is needed for change, and identify opportunities to strengthen relationship building and engagement. Participants will also be introduced to HYPE's Employment and Education Matrices, which help providers match interventions to a young adult's stage and factors of change. Together, these tools provide a structured approach to engaging young adults and supporting them to explore, identify, pursue, and achieve meaningful school and work goals.

Participants will leave with an introduction to a set of practical tools and helpful framework for moving from reactive service delivery toward intentional, individualized career development support.

Objectives:
1. Discuss the factors associated with change
2. Describe how factors associated with change influence engagement and inform individualized service planning within the transtheoretical model approach
3. Identify interventions that match each stage of change with one or more factors associated with change

Intended Audience: SEES & CMs

Application of the Stages of Change for Peer Specialists
Kris Wright, LCPC
10:15-11:15 AM ET
An interactive workshop applying Stages of Change theory work with individuals on goals peers commonly support. Blending didactic content with large and small group brainstorming, participants will practice and problem-solve using their lived experience, advocacy and skill building efforts to support individuals in their work on goals

Objectives:
1. Recall brief review of States of Change and Processes of Change with examples of clinical goals and how individuals may present in various Stages of Change
2. Work with groups of peers who work on similar goals to match and adapt tasks they often employ with the individual's Stage of Change
3. Identify how adapting tasks from your Peer toolkit(s) to Stages and Processes of Change can facilitate movement through stages and towards goals achievement.

Intended Audience: Peer Specialists

Friday, November 20

Introduction to Screening and Differential Diagnosis in Coordinated Specialty Care (CSC), PT 3
Christie Kelly, MA, LPC
12:15-1:15 PM ET
Identifying individuals who meet enrollment criteria for our Pennsylvania First Episode Psychosis (PA FEP) Centers can be difficult, and the clinical picture continues to evolve in many young adults while participating in our programs. This three-part course offers an in-depth review of referral and screening, discusses the nuanced work of ongoing differential diagnosis, and provides an overview of relevant factors prior to the onset of psychotic disorders.

Objectives:
1. Describe the positive symptoms of psychosis
2. Identify at least three negative symptoms of psychosis
3. Identify at least two common environmental contributors to the development of psychotic disorders
4. Name and describe the utility of at least one screening measure for psychosis

Intended Audience: Less than 1-Year in CSC / FEP Staff

LGBTQ+ Identity and Psychotic Disorders: Implications for Clinical Practice PT 2
Margaret (Maggie) Manges, PhD
12:15-1:15 PM ET
Psychotic-spectrum disorders are globally considered to be one of the most disabling mental health conditions and are frequently associated with negative health outcomes, such as suicide. Like people with psychosis, LGBTQ+ youth and young people face increased risk for negative health outcomes. Despite this shared risk, little has been documented in research about the intersection of LGBTQ+ identity and psychosis. Further, little is known about how these experiences may impact the quality of care received in various healthcare settings. Thus, clinicians may feel as though they lack clear guidance in culturally competent assessment, conceptualization, and intervention for this vulnerable population.

This session will provide an integrated overview of our current knowledge on the intersection of LGBTQ+ identity and psychosis. We will specifically examine the complex roles of stress and discrimination for this population. A portion of the session will cover ongoing research examining the experiences of LGBTQ+ people with psychosis when receiving mental health care, as well as work with healthcare professionals, covering topics related to clinicians' experiences, confidence, practices, or attitudes when working with LGBTQ+ patients living with psychosis.

Objectives:
1. Describe the intersecting role of stress for both LGBTQ+ people and people living with psychosis
2. Identify ways that assessment, conceptualization, or treatment may be impacted by the intersection of LGBTQ+ identity and psychosis
3. Apply a culturally-informed lens to conversations about identity and experience with LGBTQ+ patients

Intended Audience: More than 1-Year in CSC / FEP Staff & Psychiatric Care Provider Staff

WEEK 1: Coordinated Specialty Care in First Episode Psychosis

November 16-20

Session Descriptions

Friday, November 20

Application of the Stages of Change for Supported Employment and Education Specialists (SEES) & Case Managers (CMs)
Kris Wright, LCPC
12:15-1:15 PM ET
An interactive workshop applying Stages of Change theory work with individuals on employment, education and community living goals. Blending didactic content with large and small group brainstorming, participants will practice and problem-solve using their supported employment/education and/or case management skills in ways that match individuals' Stages of Change of different goals and how goals may connect in ways that support movement through Stages of Change.

Objectives:
1. Recall brief review of States of Change and Processes of Change with examples of clinical goals and how individuals may present in various Stages of Change
2. Work with groups of similar practitioners to identify common presentations of individuals in different states of change in job search, education or community living/ADL goals and how to match and adapt tasks they often employ with the individual's Stage of Change
3. Identify how adapting tasks from provider toolkit(s) to Stages and Processes of Change can facilitate movement through stages and towards goals achievement

Intended Audience: SEES and CMs

Supporting the Young Adult Peer Support Workforce: Insights from a Survey Study
Elizabeth Thomas, PhD & Haley Payne, MA
12:15-1:15 PM ET
Young adult peer support workers (YPSWs) – trained professionals typically aged 18-30 with lived experience of behavioral health conditions – are an essential and growing part of the behavioral health workforce. However, understanding of their workplace experiences remains limited, with existing studies largely relying on small samples drawn from a narrow range of service settings.

This presentation will present findings from a survey study examining the workplace experiences of YPSWs across the United States. The presenters will explore key domains including satisfaction with pay, supervision, and intergenerational workplace climate, and experiences of stigma, and highlight important differences by certification status. They will also describe perceived strengths and challenges in the workplace as well as participant-driven recommendations for improving workplace environments, with a focus on leadership practices, workforce supports, compensation, role clarity, and fostering meaningful inclusion. Overall, this presentation will offer actionable insights and promote dialogue on how to strengthen and sustain the YPSW workforce through a positive youth development lens.

Objectives:
1. Describe key workplace experiences of young adult peer support workers, including factors related to job satisfaction, supervision, intergenerational climate, and stigma
2. Identify workplace practices and organizational factors that can strengthen the recruitment, retention, and professional development of young adult peer support workers
3. Apply strategies for creating more supportive and inclusive work environments that recognize young adult peer support workers' strengths, expertise, and contributions to behavioral health services

Intended Audience: Peer Specialists

Friday, November 20

The CARE Training - Suicide Prevention with The Trevor Project, PT 1
Phii Regis, MPS
1:30-2:30 PM ET
The Trevor CARE training provides an overview of suicide among lesbian, gay, bisexual, transgender, queer and questioning (LGBTQ+) people and the different environmental stressors that contribute to their heightened risk for suicide. After reviewing current research, there will be an emphasis on best practices and practical steps that allies and peers can take to promote a positive environment and respond to a person who is at risk for suicide.

Objectives:
1. Describe the services offered by The Trevor Project and how young people can access them
2. Discuss the challenges facing LGBTQ+ people in their home, school, work and other environments
3. Explain the risk factors and warning signs of suicide
4. Describe how to respond to a person who is at risk for suicide and connect them to appropriate resources
5. Explain how to create supportive environments for all people that promote resiliency and decrease the risk for suicide

Intended Audience: All CSC staff encouraged to attend

The CARE Training - Suicide Prevention with The Trevor Project, PT 2
Phii Regis, MPS
2:45-3:45 PM ET
The Trevor CARE training provides an overview of suicide among lesbian, gay, bisexual, transgender, queer and questioning (LGBTQ+) people and the different environmental stressors that contribute to their heightened risk for suicide. After reviewing current research, there will be an emphasis on best practices and practical steps that allies and peers can take to promote a positive environment and respond to a person who is at risk for suicide.

Objectives:
1. Describe the services offered by The Trevor Project and how young people can access them
2. Discuss the challenges facing LGBTQ+ people in their home, school, work and other environments
3. Explain the risk factors and warning signs of suicide
4. Describe how to respond to a person who is at risk for suicide and connect them to appropriate resources
5. Explain how to create supportive environments for all people that promote resiliency and decrease the risk for suicide

Intended Audience: All CSC staff encouraged to attend

Registration information is available on the education and training page of our our website: headsup-pa.org

WEEK 2: Recovery-Oriented Cognitive Therapy (CT-R) December 14-18

Monday, December 14

Recovery-Oriented Cognitive Therapy (CT-R), PT 1
Aaron Brinen, PsyD
9:00-11:00 AM ET
Recovery-Oriented Cognitive Therapy (CT-R) is an evidenced-based treatment modality frequently utilized in first episode psychosis (FEP) care. This nine-part course covers the core components of CT-R, implementation of the model, and addresses common barriers. Each session builds upon the previous though guided discussion, case formulation and small group practice, focusing on the positive and negative symptoms, the 3 A's of CT-R, treatment planning and the application of the treatment.

Objectives:
SEE FULL LIST ON PAGE 14
Intended Audience: All CSC staff encouraged to attend

Adapting Recovery-Oriented Cognitive Therapy for Prescribers and Applying the Approach
Elisa Nelson, PhD
9:30-11:00 AM ET
Recovery-oriented Cognitive Therapy (CT-R) is an evidenced-based treatment approach utilized in first episode psychosis (FEP) care. This course covers background research for CT-R, the core principles of the model, and ways to apply CT-R strategies to challenges that may arise for prescribers when working with individuals navigating psychosis. We will give examples of ways to apply the approach to working with someone.

Objectives:
1. Describe background research for CT-R
2. Describe core principles of CT-R
3. Describe ways to apply CT-R approach to prescriber use
4. Identify ways to apply approach to current care

Intended Audience: Psychiatric Care Provider Staff

Recovery-Oriented Cognitive Therapy (CT-R), PT 2
Aaron Brinen, PsyD
11:30 AM-1:30 PM ET
Recovery-Oriented Cognitive Therapy (CT-R) is an evidenced-based treatment modality frequently utilized in first episode psychosis (FEP) care. This nine-part course covers the core components of CT-R, implementation of the model, and addresses common barriers. Each session builds upon the previous though guided discussion, case formulation and small group practice, focusing on the positive and negative symptoms, the 3 A's of CT-R, treatment planning and the application of the treatment.

Objectives:
SEE FULL LIST ON PAGE 14
Intended Audience: All CSC staff encouraged to attend

Tuesday, December 15

Adapting Recovery-Oriented Cognitive Therapy for Families and Applying the Approach
Elisa Nelson, PhD
9:30-11:00 AM ET
Recovery-oriented Cognitive Therapy (CT-R) is an evidenced-based treatment approach utilized in first episode psychosis (FEP) care. This course covers current research on adapting CT-R for families and offers guidance around increasing family member's understanding of challenges and identifying strategies with families.

Objectives:
1. Describe background research for CT-R
2. Describe core principles of CT-R
3. Describe ways to apply CT-R approach to family support
4. Identify ways to apply approach to current care

Intended Audience: All CSC staff encouraged to attend

Tuesday, December 15

Recovery-Oriented Cognitive Therapy (CT-R), PT 3
Aaron Brinen, PsyD
11:30 AM-1:30 PM ET
Recovery-Oriented Cognitive Therapy (CT-R) is an evidenced-based treatment modality frequently utilized in first episode psychosis (FEP) care. This nine-part course covers the core components of CT-R, implementation of the model, and addresses common barriers. Each session builds upon the previous though guided discussion, case formulation and small group practice, focusing on the positive and negative symptoms, the 3 A's of CT-R, treatment planning and the application of the treatment.

Objectives:
SEE FULL LIST ON PAGE 14
Intended Audience: All CSC staff encouraged to attend

Wednesday, December 16

Recovery-Oriented Cognitive Therapy (CT-R), PT 4
Aaron Brinen, PsyD
9:00-11:00 AM ET
Recovery-Oriented Cognitive Therapy (CT-R) is an evidenced-based treatment modality frequently utilized in first episode psychosis (FEP) care. This nine-part course covers the core components of CT-R, implementation of the model, and addresses common barriers. Each session builds upon the previous though guided discussion, case formulation and small group practice, focusing on the positive and negative symptoms, the 3 A's of CT-R, treatment planning and the application of the treatment.

Objectives:
SEE FULL LIST ON PAGE 14
Intended Audience: All CSC staff encouraged to attend

Adapting Recovery-Oriented Cognitive Therapy for Peer Specialists and Applying the Approach
Elisa Nelson, PhD
9:30-11:00 AM ET
Recovery-oriented Cognitive Therapy (CT-R) is an evidenced-based treatment approach utilized in first episode psychosis (FEP) care. This course covers background research for CT-R, the core elements of the model, and reviews ways to apply CT-R strategies to support program participants in peer support. We will give examples of ways to apply approach to working with someone.

Objectives:
1. Describe background research for CT-R
2. Describe core principles of CT-R
3. Describe ways to apply CT-R approach to Peer Specialists
4. Identify ways to apply approach to current care

Intended Audience: Peer Specialists

Recovery-Oriented Cognitive Therapy (CT-R), PT 5
Aaron Brinen, PsyD
11:30 AM-1:30 PM ET
Recovery-Oriented Cognitive Therapy (CT-R) is an evidenced-based treatment modality frequently utilized in first episode psychosis (FEP) care. This nine-part course covers the core components of CT-R, implementation of the model, and addresses common barriers. Each session builds upon the previous though guided discussion, case formulation and small group practice, focusing on the positive and negative symptoms, the 3 A's of CT-R, treatment planning and the application of the treatment.

Objectives:
SEE FULL LIST ON PAGE 14
Intended Audience: All CSC staff encouraged to attend

WEEK 2: Recovery-Oriented Cognitive Therapy (CT-R) December 14-18

Thursday, December 17

Recovery-Oriented Cognitive Therapy (CT-R), PT 6
Aaron Brinen, PsyD
9:00-11:00 AM ET
Recovery-Oriented Cognitive Therapy (CT-R) is an evidenced-based treatment modality frequently utilized in first episode psychosis (FEP) care. This nine-part course covers the core components of CT-R, implementation of the model, and addresses common barriers. Each session builds upon the previous though guided discussion, case formulation and small group practice, focusing on the positive and negative symptoms, the 3 A's of CT-R, treatment planning and the application of the treatment.

Objectives:
SEE FULL LIST ON PAGE 14
Intended Audience: All CSC staff encouraged to attend

Adapting Recovery-Oriented Cognitive Therapy for Supported Employment and Education Specialists & Case Managers, and Applying the Approach
Elisa Nelson, PhD
9:30-11:00 AM ET
Recovery-oriented Cognitive Therapy (CT-R) is an evidenced-based treatment approach utilized in first episode psychosis (FEP) care. This course covers background research for CT-R, covers the core principles of the model, and reviews ways to apply CT-R strategies to support individuals with their education and employment needs. We will give examples of ways to apply approach to working with someone.

Objectives:
1. Describe background research for CT-R
2. Describe core principles of CT-R
3. Describe ways to apply CT-R approach to SEES and CMs
4. Identify ways to apply approach to current care

Intended Audience: SEES & CMs

Recovery-Oriented Cognitive Therapy (CT-R), PT 7
Aaron Brinen, PsyD
11:30 AM-1:30 PM ET
Recovery-Oriented Cognitive Therapy (CT-R) is an evidenced-based treatment modality frequently utilized in first episode psychosis (FEP) care. This nine-part course covers the core components of CT-R, implementation of the model, and addresses common barriers. Each session builds upon the previous though guided discussion, case formulation and small group practice, focusing on the positive and negative symptoms, the 3 A's of CT-R, treatment planning and the application of the treatment.

Objectives:
SEE FULL LIST ON PAGE 14
Intended Audience: All CSC staff encouraged to attend

Friday, December 18

Recovery-Oriented Cognitive Therapy (CT-R), PT 8
Aaron Brinen, PsyD
9:00-11:00 AM ET
Recovery-Oriented Cognitive Therapy (CT-R) is an evidenced-based treatment modality frequently utilized in first episode psychosis (FEP) care. This nine-part course covers the core components of CT-R, implementation of the model, and addresses common barriers. Each session builds upon the previous though guided discussion, case formulation and small group practice, focusing on the positive and negative symptoms, the 3 A's of CT-R, treatment planning and the application of the treatment.

Objectives:
SEE FULL LIST ON PAGE 14
Intended Audience: All CSC staff encouraged to attend

Friday, December 18

Recovery-Oriented Cognitive Therapy (CT-R), PT 9
Aaron Brinen, PsyD
11:30 AM-1:30 PM ET
Recovery-Oriented Cognitive Therapy (CT-R) is an evidenced-based treatment modality frequently utilized in first episode psychosis (FEP) care. This nine-part course covers the core components of CT-R, implementation of the model, and addresses common barriers. Each session builds upon the previous though guided discussion, case formulation and small group practice, focusing on the positive and negative symptoms, the 3 A's of CT-R, treatment planning and the application of the treatment.

Objectives:
SEE FULL LIST ON PAGE 14
Intended Audience: All CSC staff encouraged to attend

Tuesday, 12/14-Friday 12/18

Aaron Brinen, PsyD
Recovery-oriented Cognitive Therapy (CT-R) is an evidenced-based treatment modality frequently utilized in first episode psychosis (FEP) care. This nine-part course covers the core components of CT-R, implementation of the model, and addresses common barriers.
SEE SESSION DETAILS ON PAGES 13-14

Objectives:
1. Identify appropriate uses for psychoeducation within a CT-R context
2. Describe the CT-R protocol of activation, aspirations, action
3. Describe the CT-R approach to positive psychotic symptoms
4. Describe the CT-R approach to negative psychotic symptoms
5. Describe the CT-R approach to disorganized psychotic symptoms
6. Describe the CT-R approach to cognitive impairments
7. Define and provide examples of the positive and negative symptoms of psychosis
8. Describe the CT-R approach to other mental health conditions sometimes associated with a psychotic disorder
9. Define and provide examples of disorganized psychotic symptoms
10. Define and provide examples of behavioral experiments
11. Identify key factors leading to an increase in psychotic symptom
12. Apply a recovery oriented cognitive behavioral approach in FEP practice
13. Identify support CT-R provides within the CSC treatment model
14. Review a clinical trial of CT-R therapy
15. Describe the cycle of recovery within the CT-R framework
16. Define the 3 A's of CT-R and review implementation strategies of each
17. Differentiate recovery-oriented cognitive behavioral therapy (CTR) from other psychotherapeutic treatment models
18. Define "adaptive mode"
19. Develop a plan to activate the "adaptive mode" of an FEP program participant
20. Implement a chain-analysis of program participant behavior
21. Develop a participant-centered engagement plan
22. Adapt the CT-R protocol to telemedicine applications
23. Apply activation through telemedicine
24. Use technology to reduce demand on working memory through telemedicine

Intended Audience: All CSC staff encouraged to attend

Presenter Bios

Melanie Bennett, PhD
Professor of Psychiatry, University of Maryland School of Medicine
Dr. Bennett is a psychologist and has been involved in research on treatment for early psychosis for the last decade. She has participated in funded research in this area and is active in training clinicians and programs throughout the state of Maryland on the different components of Coordinated Specialty Care. In 2020, she and her team - in collaboration with colleagues at Johns Hopkins, Sheppard Pratt, the University of Pittsburgh School of Medicine, and the University of Pennsylvania School of Medicine - joined the National Institute of Mental Health's (NIMH) Early Psychosis Intervention Network (EPINET), a national effort to create a national database to support research that will improve practice. This project supports the Connection Learning Healthcare System, a Pennsylvania-Maryland partnership to support Coordinated Specialty Care (CSC) programs and improve services in both states.

Aaron P. Brinen, PsyD
Assistant Professor of Clinical Psychiatry and Behavioral Sciences and Director of Psychotherapy Training, Psychiatry Residency Program, Vanderbilt University Medical Center
Aaron P. Brinen, PsyD, is an Assistant Professor of Psychiatry and Behavioral Sciences at Vanderbilt University Medical Center. He is the author of Living Well with Psychosis, a book for those living with psychosis. He is a primary developer of Recovery-Oriented Cognitive Therapy (CT-R) along with Aaron T. Beck, MD. Under the guidance of Dr. Beck, Dr. Brinen has worked to formalize and standardize the CT-R protocol for individual and group therapy settings, as well as for use in team-based psychiatric care and during inpatient treatment. He is a co-author of the manual of CT-R for serious mental health conditions, and has been active in the training of community therapists from around the world. Dr. Brinen is interested in researching the impact of CT-R on inpatient and outpatient individuals. Additionally, he is interested in the crossover of different evidence-based treatments, particularly prolonged exposure for PTSD applied to individuals living with both PTSD and schizophrenia. He is the principal investigator in a study applying CT-R during medication management checks and also the supervisor for the WISEUP clinical trial, studying treatment for persecutory delusions.

Joshua Calarino, CRPS
Data Analyst
Joshua Calarino, CRPS, believes in uplifting the voices of youth, young adults, families, and consumers to create meaningful, lasting change within systems of care. He is passionate about ensuring that people with lived experience are empowered as leaders and partners in transforming behavioral health systems.

Over the last decade, Joshua has grown from a youth advocate supporting his local community to a professional with lived experience who works nationally to advance equitable access to systems of care. Throughout his career, he has served as a Youth Program Coordinator, Lead Peer, Peer Evaluator, Training Coordinator, Youth Advocate, Consultant, and Youth Advisory Board member. He draws upon his lived and professional experience to strengthen behavioral health systems and improve outcomes for youth, young adults, families, and communities.
As a Youth Program Coordinator at Youth MOVE National, Joshua supported communities in implementing youth peer support services, developed and expanded training curricula, and delivered training and technical assistance nationwide. He also created programming to help communities implement racial equity practices and believes that lasting innovation is achieved through authentic partnerships and collaboration.

Joshua also served as Board President of Youth MOVE National, providing governance leadership, supporting the Executive Director, Johanna Bergan, and supporting organizational growth while ensuring alignment with the organization's mission and vision. Throughout his work, he prioritized continuous quality improvement and maintained his credential as a Certified Recovery Peer Specialist (CRPS) in Florida.
As the staff lead at Youth MOVE National for the University of Connecticut School of Social Work's Mobile Response and Stabilization Services (MRSS) initiative, Joshua partnered with national leaders to strengthen youth-centered crisis response systems. His contributions included leading the six-part webinar series, Designing with Youth: Strategies for Building Crisis Response Systems; contributing to the publication Mobile Response & Stabilization Services National Best Practices; participating in monthly coaching sessions with MRSS Quality Learning Collaborative (QLC) sites; and helping develop tools and resources that support MRSS implementation and sustainability.
These experiences reinforced Joshua's commitment to building equitable, youth-driven systems of care and deepened his appreciation for collaborative partnerships that improve services for youth, young adults, and caregivers during their most vulnerable moments. He continues to champion authentic youth partnership, peer support, and systems transformation, believing that sustainable change happens when communities intentionally design solutions alongside those with lived experience.

Monica Calkins, PhD
Professor of Psychology in Psychiatry; Co-Director, HeadsUp; Director, Clinical Research Assessment, Neurodevelopment and Psychosis Section; Associate Director, Penn Psychosis Evaluation and Recovery Center (PERC), University of Pennsylvania
Monica E. Calkins, PhD, is the HeadsUp Co-Director who oversees outreach, education, training, and Coordinated Specialty Care program evaluation and fidelity. Dr. Calkins grew up in Philadelphia, attending Philadelphia public schools and earning a bachelor's degree from Temple University. She earned a doctorate in Clinical Science and Psychopathology Research from the University of Minnesota and completed a post-doctoral fellowship at the University of Pennsylvania before joining its faculty, currently Professor of Psychology in Psychiatry. Dr. Calkins' research and clinical work focuses on early identification and intervention in psychotic disorders, and she has authored more than 280 scholarly publications in this area. Her work and mission is to improve the lives and experiences of young people with psychosis and their families.

Joscelyn Cura, BA
Supportive Employment and Education Specialist, STEP Team, University of Pittsburgh Medical Center
Joscelyn Cura, BA supports recovery from the inside out—across inpatient and outpatient care. As a Milieu Therapist at Western Psychiatric Hospital, she continues to work on the unit providing direct care and group facilitation. In her full-time role as a Supported Employment & Education Specialist within a First Episode Psychosis clinic, she helps individuals navigate employment, education, and long-term recovery. Her work across both settings focuses on empowerment, skill-building, and meaningful community integration.

Jessica Engel, BA, CPRS
Communications and Outreach Manager, PathLab, University of Pittsburgh School of Social Work
Jessica is a writer of fantasy genre fiction as well as a costume jewelry designer. She earned her Bachelor of Arts in English with a concentration in creative writing from George Mason University. Jessica is a Certified Peer Recovery Specialist in Maryland who specializes in first episode psychosis care for young adults. She has created and facilitated workshops to improve the wellbeing of individuals. In her free time, she likes to play Role-Playing Game (RPG) video games and craft collage art.

Arielle Ered, PhD
Assistant Professor, Department of Psychiatry and Behavioral Health, The Ohio State University Medical Center; Psychologist, Early Psychosis Intervention Center (EPICENTER)
Arielle Ered, PhD received her doctorate in Clinical Psychology and Neuroscience from Temple University and completed a postdoctoral fellowship at the University of Pennsylvania Perelman School of Medicine within the Neurodevelopment and Psychosis Section before joining the EPICENTER Faculty. Her research focuses on neural, cognitive, and behavioral outcomes following early life adversity (including neighborhood-level environmental factors, psychosocial stress, and trauma) within the psychosis spectrum.

Amanda Fooks, MSW, LCSW
Team Leader, CAPSTONE
Amanda Fooks, MSW, LCSW, has been working with individuals experiencing psychosis since 2010 and has been dedicated to the CAPSTONE program since its inception in March 2017. She coordinates a team of providers from multiple agencies to provide comprehensive care for individuals living with first episode psychosis. In addition, she has been instrumental in efforts at Pennsylvania Psychiatric Institute (now Penn State Psychiatry and Behavioral Health) to expand and improve care of people experiencing psychosis across the life span. This has become her passion, and she continues to strive to engage and motivate her participants and staff alike.

Jennifer Gerlach, LCSW
Psychotherapist
Jennifer Gerlach, LCSW, is a trainer, consultant and therapist specializing at the crossroads of neurodiversity and psychosis. She is author of "The Psychosis and Mental Health Recovery Workbook: Tools For Young Adults from ACT, DBT, and Recovery-Oriented CBT. She speaks from a perspective infused by both clinical and lived experience of psychosis.

Ashley Hewlett, MSW
Program Evaluator with the PEACE Program at Horizon House
Originally from Mississippi, Ashley earned her bachelor's degree in psychology from Millsaps College in Jackson, Mississippi. She then relocated to Pennsylvania to pursue her Master of Social Work at Marywood University. While at Marywood, she gained experience in academic research and program evaluation as a research administrator working with the Institutional Review Board and the Research and Sponsored Programs departments. In her current role, Ashley oversees data collection, data management, and quality assurance; supports research initiatives; facilitates groups; and provides administrative and clinical support. Her work focuses on improving services for individuals experiencing early psychosis.

Keith Karabin, MSCC, LPC
Counselor, On My Way, Child and Family Focus, Inc.
Keith Karabin, MSCC, LPC is the Clinical Team Lead for Child and Family Focus' On My Way program in Bucks County, PA. He is known for a joyful "never give up" approach to living well, even after 30 years of counseling experience. As a person on his own healing journey, Keith relates to each client with hope, without judgement and most of all, as equal partners in their growth. Keith works with those successfully navigating psychosis, other mental health issues, and everyday struggles in their pursuit of healthy modern living. Many of these individuals—usually his favorites!—have been referred to him because they, or those who care about them, had felt that healing wasn't possible. Outside the counseling studio, Keith serves as a group clinical supervisor, co-program developer and public speaker, contributing to multiple County-level initiatives that improve mental health care and reduce stigma barriers so that all people can pursue wellness without fear.

Nicole Kastner, CPS
Certified Peer Specialist, Helping to Overcome Psychosis Early (HOPE), Children's Service Center
Bio pending

Christian (Christie) Kelly, MA, LPC
Program Supervisor, UPMC Services for the Treatment of Early Psychosis (STEP) Program
Christie Kelly, MA, LPC, is a licensed professional counselor with 20 years of experience in varying settings of the mental and behavioral health field. Christie currently practices as a therapist and Program Supervisor at the UPMC Services for the Treatment of Early Psychosis (STEP) clinic in Pittsburgh, PA. Christie received her undergraduate degrees in Criminal Justice and Psychology from Gannon University and Masters degrees in Rehabilitation Counseling from Edinboro University and Business Administration from Capella University. She is currently completing a Master's in Business Administration with Capella University. Previous experience includes supervising outpatient mental health and school-based mental health programs, supervising one of the largest research-based summer treatment programs in the country, and owning a small, private practice in the Pittsburgh area. Christie is passionate about learning new therapeutic techniques and offering guidance and supervision to the future counselors of Pennsylvania. Christie has extensive training and experience in treating various mental health populations including psychosis, autism-spectrum, intellectual disabilities, anxiety disorders, tic disorder and ADHD, including being trained in the administration of the Autism Diagnostic Observation Schedule (ADOS) and Functional Behavior Assessments (FBA). Through her work within school settings across Pennsylvania, she has gained a grounded perspective in the unique challenges affecting children, adolescents, and transition-aged youth.

Presenter Bios

Nina Koch, MSS, LSW
Program Director, PEACE Program, Horizon House, Inc.
Nina Koch, MSS, LSW, is the Program Director of PEACE (Psychosis Education, Assessment, Care, and Empowerment), a Horizon House program in Philadelphia that serves young people experiencing a first episode of psychosis. She joined the team in 2019 as a Resilience Counselor, later stepped into a Lead role, and now oversees the program's multidisciplinary team.

Nina is a licensed social worker with a master's degree from the Bryn Mawr Graduate School of Social Work and Social Research. She has a strong clinical foundation and supports people through a trauma-informed lens, drawing on Cognitive-Behavioral Therapy (CBT), Psychodynamic and Relational Approaches, and Motivational Interviewing.

A native Philadelphian, Nina brings more than a decade of experience working with youth and advocating for Black, Brown, and marginalized communities. Her work is rooted in community advocacy, including access to food and care, and healing from the impact of community violence. She received the Golden Bowtie Award from the Beck Institute Center for Recovery-Oriented Cognitive Therapy and is a member of the Philadelphia Regional Forum on Early Psychosis Care. She is passionate about social justice, mental health equity, and leading with creativity and connection.

Christian Kohler, MD
Professor of Psychiatry; Co-Director, HeadsUp; Clinical Director, Neurodevelopment and Psychosis Section; Director, Penn Psychosis Evaluation and Recovery Center (PERC), University of Pennsylvania
Christian Kohler, MD, is the co-director of HeadsUp. Dr. Kohler grew up in Austria and obtained a doctorate in medicine from Innsbruck University. He completed residencies in psychiatry at Wright State University and neurology at the University of Cincinnati, and subsequently a post-doctoral fellowship at the University of Pennsylvania. Dr. Kohler has been on the faculty at the University of Pennsylvania since the late 1990s and is currently Professor of Psychiatry and Neurology. He has participated in research on emotional processing, brain-related studies and novel treatments, resulting in over 100 publications to date. Dr. Kohler has extensive experience in the treatment of severe mental illness and, in particular, of young persons living with recent onset of psychosis — a challenging and rewarding area to pursue improvement in clinical symptoms and functioning.

Spencer G. Lawson, PhD
Assistant Professor in University of Massachusetts Chan Medical School's Law & Psychiatry Program
Spencer Lawson, PhD, is an Assistant Professor in the Law & Psychiatry Program and faculty in the Implementation Science & Practice Advances Research Center (iSPARC) within the Department of Psychiatry and Behavioral Sciences at UMass Chan Medical School. He is also the Co-Principal Investigator of the Implementation of Risk-Need-Responsivity: Service Accessibility for Justice-Involved Transition Age Youth with Serious Mental Health Conditions study, which is one of the research projects of The UMass Chan & Temple Collaborative Center for Community Inclusion and Reflective Collaboration (CIRC Center). As an interdisciplinary community-engaged criminologist, Dr. Lawson's career mission is to a) manage and prevent behavioral health disorders and b) improve responses to individuals' criminogenic risk-need profiles across multiple points in the legal system via implementation and applied research of valid risk screening and assessments paired with Risk-Need-Responsivity approaches. Dr. Lawson is a Level 1 Certified Implementation Support Specialist, bringing expertise in implementation support and the application of implementation science methods to improve the uptake and sustainability of interventions across justice and behavioral health systems. Dr. Lawson's funding comes from federal sources (e.g., National Institute of Justice, National Institute on Disability, Independent Living, and Rehabilitation Research), along with state funding from Indiana, Massachusetts, and Colorado, and philanthropic funding (e.g., John D. & Catherine T. MacArthur Foundation). Dr. Lawson was a W.E.B. Du Bois Fellow on an early career award from the National Institute of Justice to work with the Massachusetts Department of Correction on assessing predictive accuracy and neutrality within their objective prison classification system.

Frank T. Leone, MD, MS
Director, Comprehensive Smoking Treatment Program, University of Pennsylvania
Frank Leone, MD, MS, is a practicing pulmonologist and Professor of Medicine at the Perelman School of Medicine, University of Pennsylvania. He directs Penn's Comprehensive Smoking Treatment Program, a multidisciplinary care resource that provides consultative evaluation and management services to patients suffering complex manifestations of tobacco use disorder. Dr. Leone is a Senior Fellow of the Leonard Davis Institute of Health Economics; his scholarship focuses on investigating advanced treatment strategies for tobacco use disorder. Dr. Leone has published over 145 peer-reviewed papers including several evidence-based treatment guidelines, and has co-authored a clinical handbook of tobacco dependence treatment titled *Why People Smoke: An Innovative Approach to Treating Tobacco Dependence*.

Alicia Lucksted, PhD
Associate Professor, Department of Psychiatry, University of Maryland School of Medicine
Alicia Lucksted, PhD, is a clinical-community research psychologist at the University of Maryland School of Medicine and the Veterans Administration VISN-5 MIRECC (Mental Illness Research, Education, and Clinical Center) in Baltimore Maryland. Her work focuses on development, testing, change processes, user experiences, and dissemination of psychosocial interventions promoting mental health recovery, including self-help among program participants and family members, using both quantitative and qualitative methods. Current focus areas include societal and internalized (self) stigma regarding mental illness and other health conditions, stigma and engagement in healthcare and recovery, and supporting the thriving of young adults experiencing psychosis and other mental health conditions as part of the Connection-Learning Healthcare System Early Psychosis Intervention Network hub (NIH) and the University of Massachusetts Chan Rehabilitation Research and Training Centers (RRTC) on Community Living and Participation Among Transition Age Youth with Serious Mental Health Conditions From Disadvantaged, Vulnerable, or Marginalized Backgrounds (NIDILRR).

Margaret (Maggie) Manges, PhD
Assistant Professor of Psychology
Margaret (Maggie) Manges, PhD, is an assistant professor of psychology at the Rochester Institute of Technology. She completed her postdoctoral fellowship at the Ohio State University Early Psychosis Intervention Center (EPICENTER), and her PhD in Counseling Psychology at the University at Buffalo, SUNY. Dr. Manges' research focuses on high-risk outcomes, such as bullying, sexual violence, substance use, and suicide, among the LGBTQ+ community and people with early episode psychosis. In particular, she aims to understand symptom variance, barriers to care, and treatment gaps for LGBTQ+ youth and young people with emerging psychosis. She is also deeply committed to the development and dissemination of prevention and intervention science. Her scholarship and dedication to the field of psychology has garnered awards from her university and from professional organizations, including the PhD Excellence Award, the Excellence in Research, Scholarship, and Creativity Award, and the American Psychological Association Division 44 Rising Star Award in Leadership and Advocacy.

Jamir McIntosh, CPS, CHWP
Certified Peer Specialist, PEACE
Jamir was born and raised in Philadelphia. After struggling with mental health in his youth and early adulthood, he decided to become a Peer Specialist to help other people who are going through similar struggles that he did. He got his certification in December of 2025.

Alexandra (Alex) Miller, MD, MSEd
Assistant Professor of Clinical Psychiatry, Perelman School of Medicine at the University of Pennsylvania
Alexandra (Alex) Miller, MD, MSEd completed her medical degree at the Perelman School of Medicine and earned a master's in education from Penn's Graduate School of Education. She went on to complete her psychiatry residency at the University of Pennsylvania, where she served as Chief Resident. Dr. Miller is actively involved in medical education, serving as Associate Program Director for the Resident Didactic Curriculum, Associate Director for Medical Student Education in Psychiatry, and Co-Director of the Doctoring 1 course for preclinical medical students. Clinically, Dr. Miller provides both medication management and psychotherapy to individuals experiencing psychosis at the Penn Behavioral Health Outpatient Psychiatry Clinic, with a special focus on young people transitioning from Coordinated Specialty Care programs. She is passionate about addressing the impact of trauma and marginalization on mental health and is committed to providing holistic, patient-centered care aligned with each person's values and goals.

Mark Morales, MD
Psychiatric Director, CFG Health
Dr. Morales earned his BA in Slavic Studies at Brown University. Prior to medical school, he taught high school math in the Philadelphia public school system and served as an Americorps volunteer in Camden, NJ for a community health team. He attended medical school at the Perelman School of Medicine, University of Pennsylvania and stayed at the University of Pennsylvania for psychiatry residency. After residency, he worked as an attending psychiatrist at Horizon House, Inc. in the PEACE program, where he worked with adolescents and young adults experiencing their first psychotic break. Dr. Morales transitioned into the world of corrections full time in August 2025 and serves as the psychiatric director for the Philadelphia Department of Prisons with CFG Health. He currently oversees the delivery of psychiatric services to the roughly 3,300 individuals incarcerated there, including approximately 400 patients living with serious mental illness.

Michelle G. Mullen, PhD
Assistant Professor at the University of Massachusetts Chan Medical School; Co-PI of the Learning and Working During the Transition to Adulthood Rehabilitation Research and Training Center (RRTC); Senior Vice President, Chief Impact Officer at The Jed Foundation
Michelle G. Mullen, PhD, is an Assistant Professor in the Department of Psychiatry at UMass Chan Medical School and Founder and Principal of Strategy Lab, a consulting group focused on translating research into innovative, effective services for youth and young adults. Dr. Mullen is a researcher, intervention developer, and implementation specialist with more than 20 years of experience designing, evaluating, and implementing education, employment, and mental health services for individuals with mental health conditions. Her work focuses on improving career development opportunities and long-term educational and employment outcomes for young adults from historically discriminated against communities, including those with mental health conditions.

Dr. Mullen is the principal developer of Helping Youth on the Path to Employment (HYPE), a comprehensive career development intervention that integrates supported education and employment services to help young adults identify, pursue, and achieve meaningful career goals. She also developed Focused Skill and Strategy Training (FSST), an evidence-based cognitive remediation intervention designed to strengthen executive functioning skills and improve academic and employment outcomes. Her research examines approaches to improving educational persistence, career development, and economic self-sufficiency among young adults with mental health conditions.

Dr. Mullen currently serves as the Co-Director of the Transitions to Adulthood Center for Research at UMass Chan Medical School, which focuses on improving outcomes among young adults with mental health conditions. She is also the Co-Principal Investigator of a federally funded research and training center, entitled Learning and Working During the Transition to Adulthood, that focuses on enhancing employment and educational outcomes for young adults.

Dr. Mullen has extensive experience working with state behavioral health systems and community-based organizations to develop and implement services for young adults, including those experiencing first-episode psychosis (FEP). In **Louisiana**, she partnered with the State Office of Behavioral Health to conduct statewide needs assessments, develop FEP service options aimed at reducing the duration of untreated psychosis, examine sustainable funding mechanisms, and provide training to support implementation. In **New Jersey**, she worked with the Division of Mental Health and Addiction Services and a multidisciplinary team of experts to train community mental health providers and stakeholders on early intervention programming and career services for individuals experiencing FEP.

Previously, Dr. Mullen served as Senior Vice President and Chief Impact Officer at The Jed Foundation (JED), where she led national efforts to strengthen mental health systems for teens and young adults. Across her research, leadership, and consultation roles, she is committed to bridging the gap between research and practice to improve services and meaningful life outcomes for young people living with mental health conditions.

Presenter Bios

Elisa Nelson, PhD
Psychologist, Psychosis Evaluation and Recovery Center (PERC), University of Pennsylvania
Elisa Nelson, PhD, is a psychologist in the Psychosis Evaluation and Recovery Center (PERC) at the University of Pennsylvania. She spent five years providing training to mental health providers in Recovery-Oriented Cognitive Therapy (CT-R) for individuals living with serious mental health conditions. She completed her post-doctoral training in CT-R at UPenn and worked at the Beck Institute for two years training staff from various disciplines in this approach. She is currently interested in researching CT-R concepts and the effectiveness of this approach in coordinated specialty care programs, including ways CT-R can be adapted to support families.

Melissa M Nelson, EdD
Assistant Professor of Practice, School of Education, University of Pittsburgh
For over 30 years, Melissa M. Nelson, EdD, has worked in the space where K-12 education, behavioral health services, law enforcement, and legal systems intersect. She has served in a variety of roles in urban, suburban, and rural education systems, including as an elementary and special education teacher and elementary and secondary administrator. Prior to her work in education, Dr. Nelson spent over a decade as a mental health clinician and victim advocate in various psychiatric, mental health, and legal settings. Dr. Nelson teaches graduate and doctoral courses focused on school safety and security, school law, and crisis leadership across systems.

Dr. Nelson's professional work focuses on Behavioral Threat Assessment and Management (BTAM), suicide prevention and postvention, and school-based behavioral health systems. She supports leaders and multidisciplinary teams as they navigate high-risk, high-consequence situations and build the organizational capacity necessary to make sound decisions during crises.

Dr. Nelson has served as a consultant to the United States Secret Service, the FBI Pennsylvania Field Offices, the Pennsylvania Office of Homeland Security, and as a subject matter expert for the US Department of Homeland Security's Public-Private Analytic Exchange Program. She has worked with school districts, intermediate units, and multidisciplinary teams across the United States to strengthen BTAM processes, suicide prevention efforts, crisis response protocols, and comprehensive school safety initiatives.

In addition to her academic and consulting work, Dr. Nelson serves as a forensic expert for Park Dietz and Associates in cases involving K-12 educational Standards of Care. Her forensic work focuses on educational practices related to student safety, BTAM, suicide prevention, and crisis response.

Dr. Nelson is recognized for her ability to synthesize research, policy, and practice across disciplines and translate complex concepts into practical frameworks that strengthen leadership capacity. Her teaching, consulting, and forensic work are grounded in the belief that effective leadership during crisis depends on sound professional judgment, multidisciplinary collaboration, and the development of prevention, intervention, and recovery systems that support informed and defensible decision-making.

Haley Payne, MA
Clinical Psychology Doctoral Student, Philadelphia College of Osteopathic Medicine (PCOM)
Haley Payne, MA, is a fourth-year clinical psychology doctoral student at the Philadelphia College of Osteopathic Medicine. Haley has worked across the lifespan, primarily focusing on youth and young adult populations. Her clinical and research interests focus on developmental trauma and the lived experiences of individuals with mental health conditions in workforce participation.

Mei Elizabeth Pearlstein (she/her/hers), BS
Young Adult Mental Health Advocate, Research Coordinator, University of Massachusetts Chan Medical School
Mei Pearlstein, BS, is a Young Adult Mental Health Advocate and Research Coordinator at UMass Chan Medical School, where she supports community-engaged research focused on improving community living, education, and employment outcomes and advancing health equity for youth and young adults with the greatest support needs.

Since joining UMass Chan in 2022, Mei has coordinated multiple research initiatives aimed at reducing health disparities and improving social determinant of health outcomes of young adults. She manages multiple concurrent research projects, overseeing project coordination, participant recruitment, community partner engagement, qualitative and quantitative data collection and analysis, and dissemination activities. Her experience includes conducting focus groups and interviews, analyzing qualitative and quantitative data, and contributing to academic manuscripts, conference presentations, webinars, and toolkits.

Prior to joining UMass Chan, Mei completed her undergraduate practicum with the Massachusetts Department of Mental Health, where she contributed to the empirical evidence of the peer role being a crucial support for mental health recovery and furthered the science of the growing peer mentor field.

Mei's commitment to health equity began during her internship with the International Institute of New England, where she supported refugees and asylees as they navigated employment, housing, healthcare, and community resources. This experience reinforced her dedication to addressing the social determinants of health and promoting equitable access to care.

Mei earned her Bachelor of Science in Health Science from Boston University in 2022. She is a co-author of the 2024 peer-reviewed publication, Relational Complexity of the Near-Age Peer Support Provider Role in Youth and Young Adult Community Mental Health Settings, and has presented her work at state and national conferences, including the Alliance for National Institute on Disability, Independent Living, and Rehabilitation Research (NIDILRR) Grantees meeting and the Massachusetts Department of Mental Health Young Adult Peer Mentor Summit.

Her research interests include community-engaged research, youth and young adult mental health, peer support, implementation science, and advancing equitable behavioral health systems.

Phii Regis, MPS
Manager of Public Training, The Trevor Project
Phii Regis (they/them), MPS, is the Manager of Public Training at The Trevor Project, the world's largest suicide prevention and crisis intervention organization for LGBTQ+ young people. Phii helps manage the design and facilitation of public training that empowers youth-serving professionals and other audiences to be impactful supporters of LGBTQ+ youth. Prior to joining The Trevor Project, Mx. Regis delivered LGBTQ+ inclusion training at the Human Rights Campaign Foundation. They hold a BA in Political Science from Adelphi University and an MPS in Political Management from The George Washington University.

Aaron Richter, BJ, BA
Master of Social Work Student, Temple University
Aaron Richter, BJ, BA, is an MSW student at Temple University in his advance year. For nearly 20 years, he's worked as a full-time editorial and commercial photographer. His background is in journalism and magazine-making. He launched his photography career in New York with an emphasis on portraiture and developed an extensive client list of magazines, newspapers and brands, including the New York Times, Esquire, Saks Fifth Avenue and Men's Health. You can explore the portfolio of images he's made at www.aaronrichter.com. In 2021, Aaron moved to Philadelphia, and while continuing to work as a photographer, he returned to school in 2025 with the hope of developing a therapy practice that recognizes photography as tool for healing. He completed his generalist-year internship with Philadelphia's PEACE program, an early intervention service for young adults experiencing first-episode psychosis, and he is currently in his advanced-year internship with Princeton House Behavioral Health, a New Jersey–based partial hospitalization/intensive outpatient program, working within the dual diagnosis track. During his time at PEACE, Aaron began developing Learning Photography as a Mindfulness Practice (LPMP) as an at-present six-module training designed to teach agency staff techniques and strategies for incorporating picture-making into community-based therapy processes. Aaron still maintains a regular photography practice and is looking to revise and expand LPMP and explore ways to develop an evidence base behind his training.

Joshua Riley, MD, PhD
Psychiatrist, ENGAGE, Wesley Family Services
Joshua Riley, MD, PhD, has been the psychiatrist at the ENGAGE program through Wesley Family Services for Allegheny and Westmoreland Counties for three years. He earned his undergraduate degree from the University of Cambridge before completing a PhD in Linguistics at the University of Maryland - College Park and an MD at the University of Kentucky School of Medicine. After medical school, he completed residency training in psychiatry at Western Psychiatric Hospital/UPMC, during which he designed and co-led an Acceptance and Commitment Therapy (ACT) for Psychosis therapy group on an inpatient schizophrenia unit. In the past, he also worked as a psychiatrist at Mon Yough Community Services. Currently, he is a clinical assistant professor at the University of Pittsburgh and teaches an annual course on the history and philosophy of psychiatry to psychiatry residents. He is also in private practice in Pittsburgh at OCD Spectrum. He is especially interested in the intersection of OCD and psychosis and the overlap in psychotherapeutic approaches useful for both challenges, particularly Acceptance and Commitment Therapy. He is also interested in phenomenological approaches to understanding psychosis as a self-disorder and the implications for treatment.

Kristin Rivera
Co-Investigator and Young Adult Advisory Board Member
Over the years, Kristin has embraced their passion for advocacy and the peer movement. By using their combined personal and professional experiences, Kristin supports youth, young adults, and families who are navigating child-serving systems and/or transitioning into adult service systems. Kristin specializes in engagement strategies, youth and adult partnerships, and event planning to cultivate intergenerational connections and collaboration across local, statewide, and national communities. Outside of work, Kristin enjoys spending time with loved ones, taking adventures in nature, and tending to their houseplants. Kristin aspires to "be the change they wish to see in the world" and continue uplifting the voices of system-impacted youth and young adults.

Krissa Rouse, MA, LCPC
Licensed Clinical Professional Counselor, Carpenter Clinic, University of Maryland School of Medicine
Krissa Rouse, MA, LCPC, is a Senior Counselor with the University of Maryland School of Medicine's Carpenter Clinic, where she provides specialized care for young people navigating early psychosis and their families. With more than 10 years of experience in Coordinated Specialty Care, she has developed and leads the clinic's family programming and serves as a community liaison, building partnerships to expand access to early intervention services—so support is available to those who want it, when they want it.

Krissa is actively involved in the national Early Psychosis Intervention Network (EPINET), contributing to numerous committees, workgroups, and projects, including the SPARK Engagement Team. Grounded in recovery-oriented, person-centered care, she has seen that no two people experience, interpret, or relate to psychosis in the same way — and that each person has the right to define what that experience means to them, and what kind of support, if any, they want. She works alongside individuals and families to understand each person's perspective, respecting their autonomy at every step while helping build resilience and chart a path forward that reflects their values and goals.

Through her clinical work, family education, and community outreach, Krissa advocates for early access to support and meaningful connection, paired with compassionate, evidence-based care for those who choose it.

Presenter Bios

Andrea (Ande) Silverman, LCSW
Manager/Lead Resilience Counselor of PEACE Program
Ande is a Licensed Clinical Social Worker in Philadelphia. She received a Master's Degree in Social Work from Temple University and has focused her work on early psychosis care for the last six years. She currently holds a dual Manager-Therapist role on Horizon's House's PEACE (Psychosis Education, Assessment, Care, and Empowerment) Team, a First Episode Psychosis program serving young people in Philadelphia. Central to her clinical work is a focus on building trust and relationships with an understanding of how trauma and systemic oppression impact early psychosis experiences. In 2024, Ande received Horizon House's Elizabeth Brumbaugh Award for outstanding work and commitment to program participants. Ande is also an Adjunct Instructor for Widener University's Trauma Certificate.

Alison Swigart, MD
Assistant Professor, Penn State Department of Psychiatry and Behavioral Health, Penn State College of Medicine; Psychiatrist, CAPSTONE
Alison Swigart, MD, graduated from medical school at the University of Rochester School of Medicine and Dentistry and completed psychiatry residency training at Brown University. She is an Assistant Professor in the Penn State Department of Psychiatry and Behavioral Health, and serves as Director of the Penn State Community Psychiatry program. She works as an attending psychiatrist at Pennsylvania Psychiatric Institute (now Penn State Psychiatry and Behavioral Health) in Harrisburg, PA, where she focuses on the treatment of individuals living with First-Episode Psychosis (FEP) as well as Schizophrenia across the lifespan. She has worked with participants in the CAPSTONE FEP program since 2018. She is actively involved in the education of medical students, residents, and fellows, and has received awards for teaching.

Andreea Temelie, PharmD, BCPP
Clinical Pharmacist, University of Pittsburgh Medical Center
Andreea Temelie, PharmD, BCPP, received her BS in psychology from the University of Michigan and PharmD from the University of Minnesota with an integrative interprofessional mental health focus and leadership emphasis. She completed psychiatric pharmacy residency training at UPMC Western Psychiatric Hospital. Following residency, Dr. Temelie expanded clinical pharmacy services within the UPMC ambulatory child/adolescent psychiatry service line through integration into several hospital-based clinics and partial hospitalization/intensive outpatient programs. As a board-certified psychiatric pharmacist, she provides clinical pharmacy services and education for patients and providers on evidence-based treatment for developmental and behavioral health conditions.

Elizabeth (Liz) Thomas, PhD
Assistant Professor, College of Public Health, Temple University
Elizabeth (Liz) Thomas, PhD, is an assistant professor in the College of Public Health at Temple University. She is a psychologist and mental health services researcher with a background in psychiatric rehabilitation and recovery-oriented treatment for individuals living with serious mental illnesses. Her research has particularly centered on early intervention in psychosis, treatment decision-making, and the role of peer specialists in fostering service engagement and community participation. Currently, Dr. Thomas is pursuing research on peer-delivered decision support to enhance emerging adults' engagement in early intervention services with support from a K08 Mentored Clinical Scientist Research Career Development Award from the National Institute of Mental Health. She is grateful for the profound influence that peer specialists have had on her work and understanding of how to best serve individuals living with significant mental health issues.

Gina Vincent, PhD
Professor & Co-Director of the University of Massachusetts Chan Medical School's Law & Psychiatry Program
Gina Vincent, PhD, is a Professor of Psychiatry, Co-Director of the Law & Psychiatry Program, and faculty in the Implementation Science & Practice Advances Research Center (iSPARC) in the Department of Psychiatry and Behavioral Sciences at UMass Chan Medical School. She is also the Co-Principal Investigator of the Implementation of Risk-Need-Responsivity: Service Accessibility for Justice-Involved Transition Age Youth with Serious Mental Health Conditions study. She received her PhD in Experimental Psychology with a Forensic Psychology and Law Specialization from Simon Fraser University. Dr. Vincent has received funding from the National Institute of Justice, National Institute of Mental Health, National Institute of Drug Abuse, the John D. and Catherine T. MacArthur Foundation, and Office of Juvenile Justice and Delinquency Prevention for studies relevant to implementation outcomes of risk assessment and risk-need-responsivity in legal settings, and behavioral health and substance misuse concerns among youth. She is author of the Risk Assessment in Juvenile Probation: A Guidebook for Implementation manual. She has used these methods to provide implementation assistance and training to over 50 county or state juvenile justice agencies in their selection and use of risk screening and assessment instruments and risk-need-responsivity-based treatment planning. She has over 80 publications in the areas of risk assessment validation, implementation of risk-needs assessment in youth justice settings, adolescent substance misuse, and mental health symptoms in legal settings.

Daniel (Dan) Wolf, MD, PhD
Associate Professor of Psychiatry, Perelman School of Medicine, University of Pennsylvania
Daniel (Dan) Wolf, MD, PhD, is the HeadsUp Telehealth Director, as well as a practicing psychiatrist and brain imager specializing in psychosis treatment and research. He completed medical and neuroscience training at Yale University, residency training in psychiatry at Harvard University, postdoctoral training in neuropsychiatry at the University of Pennsylvania, and has been a faculty member at the University of Pennsylvania since 2008.

Kris Wright, LCPC
Licensed Clinical Professional Counselor and Clinical Supervisor
Kris Wright, LCPC, is a trainer in empirically supported practices and Licensed Clinical Professional Counselor (LCPC) and Clinical Supervisor in Maryland and Virginia. Kris's work focuses on the Person-Centered holistic approaches working with individuals with emerging and persistent behavioral health concerns, co-occurring substance use, and trauma histories focusing on identifying and addressing the impacts of multiple life domains on individuals' behavioral health.
www.kriswrightwellness.com

Melanie Yabs, PharmD, MS, BCPP
Clinical Pharmacist, UPMC Services for the Treatment of Early Psychosis (STEP)
Melanie Yabs, PharmD, MS, BCPP, is an outpatient psychiatric clinical pharmacist at Western Psychiatric Hospital (WPH), affiliated with the University of Pittsburgh Medical Center (UPMC). Dr. Yabs's clinical focus is on transitioning patients from inpatient to outpatient care and medication/side effect management at WPH's outpatient facilities, including Services for the Treatment of Early Psychosis (STEP). Dr. Yabs's passion for the treatment of psychosis spans over a decade as she helped run clinical trials for a long-acting injectable antipsychotic that many of her patients are now stabilized on. During her pharmacy residency, Dr. Yabs also conducted research on the outcomes of long-acting injectables in early psychosis.

Davy Yue
Co-Investigator and Young Adult Advisory Board Member, University of Massachusetts Chan Medical School
Davy works in the mental health ecosystem as a consultant/advisor to nonprofits, a public speaker at conferences and summits, and a cross-sector advocate for innovations in biopsychosocial holistic recovery, especially leading with lived experience and expertise. He serves as a co-investigator on the How Do You Do Community study as well as a longtime member of the Young Adult Advisory Board at UMass Chan Medical School, having also presented his team's qualitative research at the NARRTC conference in 2026 and 2025.

Davy works as a strategic consultant who partners with mental health nonprofit organizations to convert visionary concepts into high-impact, measurable programs. With expertise in
systems thinking, data analytics, and human-centered design, he develops scalable solutions reflecting shared leadership in lived experience.

Davy looks forward to engaging in building meaningful spaces for people living with more stigmatized mental health conditions to be understood, heard, and recognized. Davy earned his bachelor's from Vanderbilt University in engineering and is informed by the perspective that the body is hardware and the mind is software, open to resilient updates and system revisions. He loves painting, playing his alto sax, and folding origami as a metaphor for wellness.

Thank you to all of our presenters!