



BE THE CHANGE:

Enhance Tobacco Use Recovery Among Individuals with Behavioral Health Conditions

APRIL 14, 2021

DESCRIPTION

As part of the NC Medicaid Transformation, all physical and behavioral health facilities that contract with Medicaid must be tobacco-free by July 1, 2022—is your facility ready?

Are you interested in supporting your behavioral health organization in going tobacco-free and expanding tobacco use treatment supports? Need assistance in taking the next steps around policy and implementation? Learn from experts how to successfully transition your facility and enhance your tobacco cessation treatment services.

AUDIENCE

Behavioral health providers, including administrators, NC licensed clinical mental health counselors, psychologists, social workers, substance use counselors, behavioral health nurses, and other professionals interested in this subject.

OBJECTIVES

Upon conclusion of this educational activity, participants will be able to:

- Describe trends in tobacco use including e-cigarettes and emerging products
- Discuss the known health effects of e-cigarette use
- Relay the alarming rates of tobacco use among populations with behavioral health conditions and how to take action to reduce this public health crisis
- Implement tobacco treatment interventions to help those with behavioral health conditions
- Describe ways of talking with individuals about how to quit
- Recognize evidence-based strategies for integrating tobacco use treatment services into their current treatment services
- List nicotine replacement therapy types and pharmacological supports, and identify the two most likely to be effective medication regimens that help people quit
- Utilize QuitlineNC to refer clients
- Describe steps to becoming a tobacco-free facility that meets Medicaid's standard for 100% tobacco-free campuses

LOCATION

DATE

WEBINAR LOGIN

PROGRAM

REGISTRATION FEE

Join us live via webinar

Wednesday, April 14, 2021

8:30 am–9:00 am

9:00 am–2:00 pm

\$20.00 (\$35.00 if after 4/7/2021)

FACULTY

Karen Caldwell, MS, is the Regional Tobacco Control Manager with the Tobacco-Free WNC Collaborative for the Tobacco Prevention and Control Branch of the NC Division of Public Health, supporting the WNC Region 2 counties of Avery, Buncombe, Burke, Caldwell, Henderson, Madison, McDowell, Mitchell, Rutherford, Polk, and Yancey.

Brian Coon, MA, LCAS, CCS, MAC, is Pavillon's Director of Clinical Programs in Mill Spring, NC. His duties include direction of the evaluation and treatment of the medical, legal, and other professionals served at Pavillon, development of organization-wide clinical programming, clinical staff education, internal and external training, outcome evaluation, research, and publication. Brian leads pre-admission clinical coordination and approval for admissions to Pavillon's residential programs. Additionally, Brian is responsible for the development and integration of the use of technology within Pavillon's clinical services.

Stephanie Gans, LCAS, LCSWA, CTTS, is a licensed clinical social worker associate, a licensed clinical addictions specialist, and a certified tobacco treatment specialist. She is a Tobacco Treatment Specialist for the Tobacco Prevention and Control Branch of the NC Division of Public Health. Stephanie has experience in working with a number of marginalized populations, such as those living with severe and persistent mental illness and substance use disorders.

Jim D. Martin, MS, works in the Chronic Disease and Injury Section of the NC Division of Public Health, and is the Director of Policy and Programs in the Tobacco Prevention and Control Branch of the NC Department of Health and Human Services in Raleigh.

PROVIDED BY



SUPPORTED BY



Public Health
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Henderson County, NC

HAVE A QUESTION?

Contact the Program Planner

Scott Melton, MDiv

scott.melton@mahec.net or 828-257-4402



Special Services

828-348-3630

REGISTRATION INFORMATION

828-257-4475

FAX REGISTRATION

828-257-4768

ONLINE REGISTRATION

www.mahec.net/cpd

EMAIL

registration@mahec.net

MAIL

MAHEC Registration

121 Hendersonville Road, Asheville, NC 28803

This continuing education program is supported by a health equity grant from public health Region 2 of the North Carolina Tobacco Prevention and Control Branch via the Henderson County Department of Public Health.

AGENDA (EST)

- 8:30–9:00** Webinar Login
- 9:00–9:15** Welcome and Overview
— Karen Caldwell, MS
- 9:15–10:30** Tobacco, E-cigarettes, and Emerging Trends
— Jim Martin, MS
- 10:30–10:45** Break
- 10:45–12:15** Tobacco Cessation Treatment Interventions
— Stephanie Gans, LCAS, LCSWA, CTTS
- 12:15–1:00** Lunch Break
- 1:00–2:00** Becoming a Tobacco-Free Facility
— Brian Coon, MA, LCAS, CCS, MAC
- 2:00** Complete Electronic Attestation and Adjourn

CLICK HERE
TO REGISTER



CREDITS



NAADAC: This course has been approved by MAHEC, as a NAADAC Approved Education Provider, for educational credits. NAADAC Provider #165445. MAHEC is responsible for all aspects of their programming. Approved for **4.0** hours.



NBCC: MAHEC has been approved by NBCC as an Approved Continuing Education Provider, ACEP No. 5514. Programs that do not qualify for NBCC credit are clearly identified. MAHEC is responsible for all aspects of their programs. Approved for **4.0** hours.

Psychologists: MAHEC is recognized by the NC Psychology Board as an approved Provider of Category A Continuing Education for NC Licensed Psychologists. Approved for **4.0** hours Category A.

CEUs: MAHEC designates this live continuing education activity as meeting the criteria for **0.4** CEUs as established by the National Task Force on the Continuing Education Unit.

Contact Hours: MAHEC designates this live continuing education activity as meeting the criteria for **4.0** contact hours.

REGISTRATION

Early registration deadline: April 7, 2021

The registration fee includes administrative costs and educational materials. If your registration is received after the above deadline, the total fee will be the registration fee + \$15.00.

MAHEC has a pay-up-front policy for all CE programs. The only exceptions will be for pre-approved programs where an individual payment plan is appropriate. Registrations that are received without accompanying payment will not be processed and participants who have not paid the course fee will not be admitted into the program.

Unless otherwise noted in course materials, the following cancellation policy applies to all programs:

- Cancellations must be in writing (via fax, email, or mail)
- Cancellations received more than 2 weeks prior to the event will receive 100% refund
- Cancellations received between two weeks and two full business days prior to the first day of the event are refunded at 70% of the registration fee subject to a minimum \$25 cancellation fee
- No refunds or credits will be given for cancellations received less than 2 full business days prior to the event
- No vouchers will be issued in lieu of a refund
- Transfers/substitute(s) are welcome (please notify us in advance of the program)

MAHEC assumes permission to use audio, video and still images from this program for promotional and educational purposes. Please speak with a staff member if you have any concerns.

Updated contact information below

By registering for this continuing education event, you are granting permission for limited participant information to be shared with representatives from public health Region 2 of the North Carolina Tobacco Prevention and Control Branch.

NAME _____

CREDENTIALS _____

SOCIAL SECURITY # XXX-XX- _____ (last 4 digits required)

OCCUPATION _____

EMAIL ADDRESS _____

HOME ADDRESS _____

CITY _____ STATE _____ ZIP _____

HOME COUNTY _____

HOME # _____ WORK # _____

EMPLOYER _____

DEPARTMENT _____

EMPLOYER'S ADDRESS _____

CITY _____ STATE _____ ZIP _____

WORK COUNTY _____

Program Registration Fee \$20.00 \$35.00 if after 4/7/2021

Full payment must accompany all submitted registrations unless a payment plan has been approved in advance. Registrations received without accompanying payment will not be processed.

- Check is enclosed Credit card information provided
- Visa MasterCard Discover Card American Express

ACCOUNT # _____

EXP ____ / ____ CODE ON BACK OF CARD _____ (3 digits)

NAME ON CARD _____

SIGNATURE _____

Program announcements will be sent to your email unless you opt out from receiving MAHEC emails. We never share our mailing lists.

Please remove my name from the MAHEC mailing list.

Send completed registration form to: Event #65584
MAHEC Registration
121 Hendersonville Road, Asheville, NC 28803 Fax: 828-257-4768