



*FORENSIC MENTAL
HEALTH: THE JOINING
OF ART & SCIENCE*

39th Annual Conference
Hyatt Regency Resort & Spa
Monterey, CA ♦ March 19-21

THE FORENSIC MENTAL HEALTH ASSOCIATION OF CALIFORNIA

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665 Third Street, Suite 516 · San Francisco, California 94107-1618

Phone: 415.407.1344 · Fax: 415.358.4757

www.fmhac.net · fmhac@fmhac.net

THINGS YOU NEED TO KNOW

ELECTRONIC EVALUATION SURVEY

The conference evaluation is electronic this year and will be emailed to you on the last day of the conference. Thank you for filling it out!

COLLEGE REGISTRATION FORM Please fill out the college registration form that was given to you when you checked in. They are submitted to the State of California who then provides funding for FMHAC, aiding us in providing the conference each year. It doesn't commit you to anything and it's an easy way for you to support FMHAC!

CERTIFICATES OF ATTENDANCE Attendance certificates are included in your packet. Please review the requirements for CEUs on page 19.

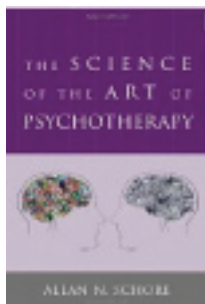
NOTICE BOARD There is a Notice Board near Registration - use it for such things as job announcements, group dinner invitations, upcoming events, or general networking!

COMPLIMENTARY RESORT BENEFITS Receive these benefits when you stay at the Hyatt as an FMHAC Conference Attendee:

- › Wifi in guest rooms
- › Self & Valet Parking
- › Shoe shine
- › 10% discount at several shops as well as \$20 credit toward the coastal/nature hike at Hyatt Carmel Highlands
- › Resort & Indoor Games
- › Complimentary tennis court time
- › Wine sample at the onsite tasting room

NAME BADGES Wear your name badges throughout the conference. This will be your entrance pass to all workshops and social events. Lost badges can be replaced at the FMHAC registration table.

CHECK OUT Check out time at the Hyatt is 12:00 noon.



RAFFLE!

Win a signed copy of Dr. Allan Schore's book [The Science of the Art of Psychotherapy](#)

FMHAC Business Meeting
5pm, Thursday, March 20th
Ballroom I/II/III

Letter from the President

Dear FMHAC Members,

I'd like to personally welcome each of you to the Forensic Mental Health Association of California's 39th Annual Conference. I am so glad that you are here with us in beautiful Monterey for what promises to be our best and most memorable conference yet. The Planning Committee has packed the next few days with thought provoking, informative, and cutting edge presentations from leaders throughout the field of forensic mental health. They've designed four educational tracks to meet the expanding interests of our members: Clinical, Sex Offender, Legal and Juvenile. The line-up offers something for everyone—whether you are just beginning your training or are a seasoned expert in the field.

A few hundred of us are converging in Monterey, coming from all around the country and from varied disciplines and agencies throughout the field of forensic mental health. But we all agree on a few things: We're here because we believe in providing effective care to mentally ill individuals in the criminal justice system. We're here because we believe in the importance of providing excellent educational opportunities to professionals who work with mentally ill individuals in forensic settings. And we're here because we believe that education is the best avenue to improving the quality of forensic evaluations and treatment, social and political policies, and public awareness regarding forensic mental health.

So, the next few days are about what we believe in. The conference is about offering some of the highest quality education in the field. It's about providing opportunities for clinicians, physicians, attorneys, law enforcement, judges, correctional officers, and students to come together and share ideas that will advance and shape the field of forensic mental health for years to come. And it's about being a part of an exciting and essential movement at a critical time when the field is changing rapidly in response to political, legal, social, and economic demands.

So soak up the presentations, dive into the discussions, roll up your sleeves, and reach out to colleagues. There are plenty of opportunities to get to know each other and share ideas at the Reception and Poster Presentation on Wednesday night and the luncheon on Thursday. But don't wait for the formal events to reach out, introduce yourself to others at the continental breakfasts on Thursday

and Friday, between presentations, or at the merchandise tables filled with the latest books in the field. There's also the Association's Annual Membership Meeting on Thursday, where you can elect new Board Members and be a part of moving the Association forward in its mission. And don't hesitate to share your ideas with the Board Members, we want to hear from you.

The next few days will be busy, but remember to make time for relaxation and fun at the Hyatt's Del Monte Golf Course or the Marilyn Monroe Spa. There's also the delicious food at the hotel's TusCa Ristorante. And don't forget to join friends, unwind, and catch up on the games at Knuckles Sports Bar.

Get ready to inspire and to be inspired. Advancements in forensic mental health start here.

Onward,



Munir Sewani, PhD

President

Forensic Mental Health Association of California

THANK YOU

2014 SUSTAINING MEMBERS

OF THE FORENSIC MENTAL HEALTH
ASSOCIATION OF CALIFORNIA

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Ken Carabello, MSW

Carson Chambers, PhD

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Douglas Taylor

Smith, LCSW

As ongoing supporters of the Association, Sustaining Members get special treatment at the conference including upgraded hotel rooms, complimentary tote bags - plus personal thank you notes from FMHAC!

PRESENTER SPOTLIGHT



Michael Caldwell, PsyD

Dr. Michael F. Caldwell is a Lecturer in Psychology at the University of Wisconsin - Madison, Co-founder and Senior Staff Psychologist at the Mendota Juvenile Treatment Center, and maintains a private practice in juvenile forensic psychology. He is President of the Wisconsin chapter of the Association for the Treatment of Sexual Abusers, a Co-investigator with the Mind Research Network at the University of New Mexico and a consultant with the National Center on Sexual Behavior of Youth at the University of Oklahoma Health Sciences Center. His current area of research focuses on the treatment of aggressive juvenile delinquents and juveniles with psychopathic features.

Dr. Caldwell is presenting *Treatment of Violent Delinquents with Psychopathic Features* on Thursday about the Mendota Juvenile Treatment Center, an innovative treatment approach that has proven successful at reducing violent recidivism, even among youth with significant psychopathic features.

EXHIBITORS

Coalinga State Hospital

Joseph Tran

Holy Names University

Lori Knight-Baker

Minnesota Sex

Offender Program

Lauren Allen

Napa State Hospital

John Wyman

Otsuka Pharmaceuticals

Reina Rittman

Leslie Costalin

Psychological Assessment Resources, Inc. (PAR)

Kathleen Woodward

Sunovion Pharmaceuticals

Tom Dahlberg

Charles O'Sullivan

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WEDNESDAY, MARCH 19

11:00 am

Spyglass 1

STATE COUNCIL ON MENTALLY ILL OFFENDERS OPEN MEETING



12:30 - 5:00pm

Meeting Room
Building

REGISTRATION

BOOKS & FMHAC MERCHANDISE FOR SALE!

2:00 - 5:30 pm

Main Ballroom

CEU
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CME
POST

OPENING SESSION (3.0 CE hrs)

Attachment, Regulation Theory, Relational Trauma, and the Origin of a Predisposition to Violence

Part 1: Early Right Brain Affect Regulation and the Origins of Emotional Well-Being

Part 2: Relational Trauma, Right Brain Affect Dysregulation, and the Origins of a Predisposition to Violence

Allan Schore, PhD, Clinical Faculty, UCLA School of Medicine

Part 1: Dr. Schore will discuss how his Regulation Theory offers interpersonal neurobiological models of attachment, detailing the enduring impact of interactively regulated bodily-based affective transactions on the organization of the infant's developing right brain, which for the rest of the life span is dominant for the nonconscious processing of emotions, stress regulation, and intersubjectivity.

Part 2: Dr. Schore will describe the negative impact of relational trauma on the developmental trajectory of the right brain and the origins of attachment trauma-related psychopathologies of self-regulation, including posttraumatic stress disorder and a predisposition to violence.

7:00 pm

Main Ballroom

WELCOME AND INTRODUCTIONS

Munir Sewani, PhD, President, Forensic Mental Health Association of California

- State Council on Mentally Ill Offenders
2014 Best Practices Awards
- Forensic Mental Health Association Annual Awards
William T. Rossiter Award for extraordinary global contributions to the field of Forensic Mental Health.
Christine M. West Award for significant individual contributions in areas of forensic mental health.

CEU
MCEP

(Welcome presentation continued)

KEYNOTE ADDRESS (1.0 CE hr)

Renewed Passion and New Methods in Forensic Mental Health

Joseph Malancharuvil, PhD, Retired Chief of Psychology, Patton State Hospital

Undiagnosed, untreated and improperly treated mental illness has been blamed for the recent national tragedies of mass shootings. Is the country ready to wake up to the fact that one in four Americans suffer from some form of mental illness, and 60 million adults and 15 million children suffer from a major mental condition? Do we need a new vision of how to address this urgent issue with renewed passion? More importantly, do we need a new method of approaching mental health issues, especially in forensic settings?

Ken Duckworth, the Medical Director of NAMI, succinctly stated: "It's much easier to get a gun than it is to get a psychiatrist. I think that's a fundamental problem - the attitudes and the access really have to be thought about more carefully." We need to heed the hopeful statement made by Rosalynn Carter at the 29th Annual Symposium on Mental Health Policy: "We have to get the word out that mental illness can be diagnosed and treated, and almost everyone suffering from mental illness can live meaningful lives in their communities."

Dr. Malancharuvil will begin a discussion of this important issue, especially some of the innovative and new methodologies that we could adopt to change the ways we address forensic mental health service delivery. Specifically, he will address innovative approaches to treating and containing sociopathy and violence and how to improve the efficacy of treatment in forensic facilities.

9:00 pm

Ballroom
IV/V/VI

FMHAC WELCOME RECEPTION

- Poster Presentations
- Keynote Book Signing

**FORENSIC
MENTAL HEALTH**
Association of California

POSTER PRESENTATIONS

≈ Jurors' Personal Bias and the Effects on LPS Conservatorship Jury Trials

≈ Competence to Stand Trial: An Analysis of the Contra Costa County Legal Process for Adults

≈ The Effects of Angry Rumination on Illegal Drug Crime

≈ Tai Chi for Patients with Dual Diagnosis

≈ A Longitudinal Study of Static and Dynamic Factors Predicting Outcomes in a Residential Program for Treating Juveniles Who Sexually Offend

≈ Clinical Training for Forensic Clinical Psychology Students: Existing Guidelines and Recommendations

≈ The Story of Scheherazade: A Fable for JSO Therapists of Transformation Through Care and Conversation

≈ Lying Behavior: The Effects of Dual-Task Performance and High Cognitive Load

≈ Mind Over Matter: Guidelines and Recommendations for the Development and Implementation of Treatment Programs for Forensic Patients with Psychiatric Disorders and Neuropsychological Impairments

CONGRATULATIONS TO THE 2014 AWARD WINNERS!

WILLIAM T. ROSSITER AWARD

The William T. Rossiter Award honors an individual who has made an exceptional global contribution to the field of forensic mental health over a period of time.

Charles Scott, MD

Nominated by Grant Ute, LCSW, (a Rossiter Award winner himself) Dr. Charles Scott has an impressive clinical and academic resume. But what makes him unique and most worthy of this Award is how he has dedicated these skills in public practice and has worked for institutional and systemic change. Through his career, he has demonstrated how excellent clinical skill, practical research and personal dedication can influence public policy and public institutions.

As soon as he arrived in California, Dr. Scott began working to improve the varying quality of forensic evaluation in the state and has been a voice for not only improving it through direct training and mentoring but by documenting the issues that substandard evaluations create for the mental health system (in inappropriate incompetent to stand trial and not guilty by reason of insanity commitments). The costs of such system misuse are considerable and are borne not only financially in inappropriate hospital and judicial costs, but also by injury of forensic mental health care workers and in some cases injury to the public. Dr. Scott's study of the forensic assessment documented the inconsistency of the application of legal standards statewide by forensic evaluators. He has also advocated to set basic forensic evaluation standards.

With the establishment of the Forensic Psychiatric Consultation Service at Napa State Hospital in 2002, Dr. Scott had a significant influence on improving staff's clinical competence. This is especially important in light of Napa's becoming largest treatment facility for persons found not guilty by reason of insanity in the country.

We are proud to award the 2014 William T. Rossiter Award to Dr. Charles Scott, a generous and good-humored educator, clinician and system change advocate, who exemplifies the values of professionalism, clinical skills, interdisciplinary respect and courage that the Forensic Mental Health Association promotes through this Award. (Text adapted from Grant Ute's Letter of Nomination. You can read the full letter on our website.)

Kit Wall & Elaine Linn

It is our pleasure to present Kit Wall and Elaine Linn with the William T. Rossiter Award this year. Dr. Munir Sewani nominated this team, led by Ms. Wall, for its dedication to and effectiveness in uniting inter-disciplinary leaders in the field of Forensic Mental Health. While they each have a career focused on mental health spanning 20 or more years, their work in forensics shines as they have been instrumental in increasing the visibility of issues in this field at the state level.

As government relations and public affairs consultants, neither Ms. Wall nor Ms. Linn are involved in our field by default - each is all the more deserving of this award, having chosen to use her skills to work on mental health issues, especially the stigmatization and criminalization of mental illness.

Since 1987, Ms. Wall has focused on government relations, especially local government and public policy, managing coalition and grassroots efforts in statewide legislative and ballot initiatives, as well as candidate campaigns. In 2001, she began concentrated efforts in jail diversion specialization across the U.S. and initiated the *Words to Deeds* concept, which has developed into the existing inter-disciplinary leadership forum.

Ms. Linn began working with mental health stakeholders in 1999 upon joining Perry Communications Group, where she managed a variety of projects for clients including the Mental Health Association in California, NAMI, the California State Sheriffs Association, and the California Psychiatric Association. Ms. Linn conducted some of the first outreach with law enforcement on behalf of California's mental health advocacy community in her work with then-Assemblyman Darrell Steinberg when he was developing the legislation that eventually led to

the Mental Health Services Act. It was during this time that she worked with Ms. Wall in creating the *Words to Deeds* concept. Since 2003, Elaine has been instrumental in coordinating each of the seven conferences.

FMHAC enthusiastically presents Kit Wall and Elaine Linn with the William T. Rossiter Award. (Read more about Kit Wall and Elaine Linn on our website.)

CHRISTINE M. WEST AWARD

The Christine M. West Award recognizes a person significant individual contributions in areas such as forensic mental health education, clinical treatment, research or program development.

David M. Polak, LCSW

Forward-thinking and dedicated, David M. Polak devoted his career to Forensic Mental Health from the beginning, even though the field was in its infancy in the late 1970s. Early on, in Santa Cruz County, he demonstrated his dedication to this field by developing the new roles of jail discharge planner for mentally ill adults and mental health liaison to the criminal court, diverting mentally ill offenders out of custody and into treatment programs. His work as court liaison was so successful that the inmate population of mentally ill adults was reduced in the county by over 50%.

Starting in 1987 as a conference attendee, Mr. Polak became involved in the Forensic Mental Health Association so as to support those in other counties facing the same difficulties he found in his. Mr. Polak went on to eventually serve in leadership roles in the Association for many years as Board Secretary and Board Director of Education. As a hard-working and loyal Board Member throughout the most challenging years of our history, he also served informally as the Association historian, which was invaluable during a period of changing Board Members and staff and shifting needs and priorities in the forensic mental health field.

A steadfast clinician in our field and four-term FMHAC board member, David Polak has long deserved this award. FMHAC is delighted to present David Polak the Christine M. West Award this year. (Read more about David Polak on our website.)

Heather C. Bowlds, PsyD

Dr. Heather Bowlds was nominated by her colleague, Hymavathi Kunamneni, PhD, for her inspiring dedication over the last decade which resulted in a state of the art treatment program for sex offender youth in the Department of Juvenile Justice (DJJ). Even at the very beginning of her career, Dr. Bowlds demonstrated a passion for improving outcomes for young sex offenders as she participated in the first Sex Offender Task Force, which attempted to standardize the treatment offered and expand it to serve the over 500 wait-listed youth.

Then, in response to the 2004 lawsuit of DJJ, Dr. Bowlds helped to write the first remedial plan for sex offender treatment. It required coordination with lawyers, consultants and court experts while simultaneously working with a changing administration and shifting political opinion. She showed extraordinary persistence in developing the best program possible so these youth could be successful. As the Clinical Coordinator for Residential Sex Behavior Treatment (RSBT), Dr. Bowlds has developed a cutting edge program in the field which incorporates all of the newest research on important elements of a juvenile program, as well as some innovative approaches such as plant and pet care.

Further demonstrating her dedication and hard work, Dr. Bowlds actively facilitates legislative changes in the community and education on issues such as the developmental differences between juveniles and adults, the relevancy of risk assessment measures and the requirement to register as a sex offender.

The knowledge, spirit of going above and beyond duty, and the open and supportive attitude that Dr. Bowlds brings as the head of this program permeates to the youth and motivates them to engage in treatment and to actualize their potential. FMHAC is proud to present Dr. Heather Bowlds with the Christine M. West Award this year and we look forward to her certain future accomplishments in the field of Forensic Mental Health. (Text adapted from Dr. Kunamneni's Letter of Nomination. You can read the full letter on our website.)

THURSDAY, MARCH 20

7:30 - 8:30am Continental Breakfast

8:30 - 10:00 am (1.5 CE hrs)

- 1. Ballroom** **The Affordable Care Act and Its Impact on Forensics**
I/II/III Steve Rosenberg, President, Community Oriented Correctional Health Services
CEU
MCEP Approximately ten million people nationally are booked into local jails each year. A disproportionate number of these individuals have mental health, substance use, or co-occurring disorders and frequently cycle between homelessness, jails, and hospital emergency rooms. Steve Rosenberg, President of Community Oriented Correctional Health Services (COCHS), will discuss the implications of the Affordable Care Act for the criminal justice system and whether it creates an opportunity for jurisdictions in California to improve public health and public safety and address costs by better managing this complex, high-need population.
CME
POST
- 2. Big Sur** **Treating Complex Trauma: Using Emotive Writing to Facilitate Post-traumatic Healing**
CEU Raymond L. Scott, PhD, Clinical Psychologist, Department of State Hospitals, Stockton
MCEP As early as 1985, clinicians and researchers began to recognize that certain forms of trauma (especially prolonged or multi-faceted trauma) lead to specific long-term effects that lay outside those formerly associated with posttraumatic stress disorder (PTSD). Herman, for example, concluded that there was “unsystematized but extensive empirical support for the concept of a complex post-traumatic syndrome in survivors of prolonged, repeated victimization. This previously undefined syndrome may co-exist with simple PTSD, but extends beyond it”. Toward alleviating suffering, clinical data suggests that trauma survivors must be allowed to tell the truth about their experiences, and members of the sufferer’s community must be encouraged to listen, to remember, and to repeat the story to others. Virginia Woolf said that the moments of profound insight that come from writing about our soulful, thoughtful examination of psychic wounds should be called “shocks”, for they force us into an awareness about ourselves and our relationships to others and our place in the world. This presentation will focus on this therapeutic writing process, which contains tremendous potential, both for healing complex trauma and for cultivating integration of the traumatic experiences. The kinds of positive changes individuals experience in applying therapeutic writing processes to overcome their struggles with trauma are reflected in both models and measures of posttraumatic growth. For most trauma survivors, posttraumatic growth and distress will coexist, and the growth emerges from the struggle with coping, not from the trauma itself.
CME
POST

Meeting Room map on back cover

- 3. Cypress**
 CEU
 MCEP
 MCLE
 POST
- Laura's Law: Two Counties, Two Perspectives, One Goal**
 Tom Behr, JD, Attorney at Law, Board Member of the San Diego County Mental Health Board
 Michael Heggarty, MFT, Director of Health (Mental Health, Public Health, Alcohol and Drug), Nevada County
- This presentation will provide the different viewpoints, experiences and outcomes of two California Counties - San Diego and Nevada County - regarding implementation of Welfare & Institutions Code Section 5345, et seq., otherwise known as Laura's Law. Laura's Law was signed into law in 2002 in response to the tragic killing of Laura Wilcox and two others in Nevada County by an individual who refused psychiatric help. The law allows for court-ordered assisted outpatient treatment. Further, the law provides for adoption of Laura's Law on a county-by-county basis. To date, only Nevada County has fully adopted Laura's Law. Yolo County implemented a pilot program effective July 2013 and several other counties are in various stages of exploration and considering implementation. San Diego County has not adopted Laura's Law but has implemented other programs, including its Mobile IHOT (In-Home Outreach Teams).
- 4. Ballroom IV/V/VI**
 CEU
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- PART 1 Forensic Expert Testimony in Sexually Violent Predator Cases**
 Amy Phenix, PhD, Private Practice
- In this presentation, Dr. Phenix will provide the skills necessary to prepare for court testimony for sexual offenders and to provide successful direct examination and cross examination in court testimony on sex offender cases. Testimonial challenges to Static-99R, Static-2002R and dynamic needs instruments will be addressed. Current research supporting sex offender risk assessment testimony will be reviewed.
- 5. Spyglass**
 CEU
 MCEP
 MCLE
 POST
- Commercially Sexually Exploited Children in the Juvenile Justice System**
 The Honorable Catherine Pratt, Commissioner, LA County Superior Court
 The Honorable Donna Quigley Groman, Judge, LA County Superior Court
 Barbara Hernandez, PsyD, LMFT, Crittenton
- This session will trace the evolving awareness and responses of American society to the issue of minor children in this country who are sexually exploited by adults for financial gain. One court system, the Juvenile Court in Los Angeles County has developed an innovative program ("STAR" Court) to guide young people to make positive changes for themselves. Although the use of incarceration is available for youth in the juvenile justice system, the STAR Court strives to use non-detention alternatives for these youth. The roles of each of the multi-disciplinary team members will be described as well the collaborative court process. The trauma-focused approach utilized by providers is essential in order for these young people to safely rebound from past and current complex trauma experiences.

10:00 am COFFEE BREAK

10:30 - Noon (1.5 CE hrs)

1. Cypress

CEU

MCEP

MCLE

CME

POST

Dancing In The Mine Field: Community Placement of Sexually Violent Predators

Alan Stillman, LCSW, Executive Director, Liberty CACONREP

Civilly Committed Sexually Violent Predators (SVPs) are being ordered out to our communities from years of institutionalization; averaging 13-15 years including incarceration and hospitalizations. Usually the court will mandate supervision and specific sexual offender outpatient treatment; in California this is provided through our Containment Model Approach.

Many question the efficacy and effectiveness of these community placements. I have explored the current literature, studies and reports to understand the effectiveness of outpatient treatment. The media is full of stories of failures in this field but the facts may demonstrate quite a different picture.

This presentation will explore the laws involved, statistics available on community placements and the ways various states have responded to the SVP population.

Mr. Stillman will explore community placement and the key elements (or potential explosive areas) involved and how they may be influencing treatment outcomes. These include supervision, housing, employment opportunities, education opportunities, individual and group therapy and the importance of therapeutic, family, social and community relationships.

As we continue to work in this field of SVPs we are responsible for honestly looking at the data and hearing from the participants as we make decisions on 'Best Practices' which directly impact our clients and our programs.

2. Spyglass

CEU

MCEP

CME

Emerging Best Practice for Persons with Developmental Disabilities with Co-Occurring Psychiatric and/or Substance Use Disorders Who Are Known to the Criminal Justice System

Peggie Webb, MA, Program Manager, San Diego Regional Center

Dick Conklin, LCSW, Criminal Justice/Mental Health Consultant, San Diego Sheriff's Department (Retired)

Kali Patterson, MFT, Project Connect Director, Exodus Recovery, Inc.

With the ongoing De-Institutionalization movement, a growing number of people with developmental disabilities in our communities have co-occurring psychiatric and/or substance use disorders. Increasing numbers of Regional Center clients have committed crimes or are at risk of doing so. In our systems, we see a common pattern of arrest while under the influence for a variety of offenses that are often felony offenses. National research indicates that approximately 33% of individuals with an intellectual disability have a co-occurring mental health disorder. Other research documents substance use as high as 26% of all persons with developmental disabilities. We often see individuals struggling with medication compliance and experiencing instability in mental health and breaking the law or engaging law enforcement through the Emergency Medical Response System. The San Diego Model of Cross Systems Navigation and Collaboration has been highly successful and well documented in the literature as a best practice for this emerging speciality population. This presentation will review this model and detail its main elements.

3. Big Sur

CEU

MCEP

MCLE

CME

Juvenile Competency Restoration in Santa Clara County: Reviewing the First Two Years

Janet Warren, DSW, Professor of Psychiatry and Neurobehavioral Sciences,
University of Virginia

Steve Monte, LCSW, Healthcare Program Manager, County of Santa Clara

After conducting a review of juvenile competency restoration programs across the United States, the County of Santa Clara, California, made a decision in 2011 to replicate the model from the Commonwealth of Virginia. Santa Clara County's program was officially launched the following year, with considerable technical support from the Institute for Law, Psychiatry and Public Policy at the University of Virginia.

This presentation will describe the history, accomplishments, and outcomes of the Juvenile Competency Restoration Program in Santa Clara County through its first two years in operation. It will present outcome data from both Virginia and Santa Clara County and will share lessons learned from replicating the Virginia Model, developed in one state and translated into another, and offer recommendations to forensic mental health professionals who are working to create programs for juvenile competency restoration. Presenters will review the responsibilities assumed by the Competency Restoration Program Manager, restoration supervisors, restoration counselors, independent evaluators, and will describe the interplay between these individuals and the court system, which is designed to promote fairness, responsiveness and objectivity to the juveniles being served in the program. A portion of the time at the end of this session will be reserved specifically for answering questions from participants.

4. Ballroom IV/V/VI

CEU

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PART 2 Forensic Expert Testimony in Sexually Violent Predator Cases

Amy Phenix, PhD, Private Practice

In this presentation, Dr. Phenix will provide the skills necessary to prepare for court testimony for sexual offenders and to provide successful direct examination and cross examination in court testimony on sex offender cases. Testimonial challenges to Static-99R, Static-2002R and dynamic needs instruments will be addressed. Current research supporting sex offender risk assessment testimony will be reviewed.

5. Ballroom I/II/III

CEU

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Mindfulness-Based Interventions for Incarcerated Youth

Sam Himelstein, PhD, Executive Director, Mind Body Awareness Project

This presentation will review what is necessary for clinicians to engage incarcerated youth in mindfulness-based interventions. Relational mindfulness (i.e., creating an atmosphere in which mindfulness can be learned) will be emphasized along with mindfulness techniques one can practice with their clients.

Meeting Room map on back cover

12:00 noon **LUNCHEON**

For a vegetarian meal, please notify the wait staff at the luncheon.

1:30 - 3:00 pm (1.5 CE hrs)

1. **Spyglass** **Dialectical Behavior Therapy: Implementation in an In-Patient Setting**

CEU

MCEP

CME

Adrienne DiFabio, PhD, Psychologist, Napa State Hospital

Nicole Weinstein, PhD, Psychologist, Napa State Hospital

California has a large forensic population with serious mental illness which includes individuals who are incompetent to stand trial, individuals who have successfully pled not guilty by reason of insanity, and individuals on parole but deemed dangerous and not in remission. Until recently, psychological interventions to treat personality disorders in this setting were unavailable and left unaddressed. In 2010, psychologists working at California forensic facilities developed a grassroots initiative to provide Dialectical Behavior Therapy (DBT) to patients diagnosed with personality disorders, specifically Borderline Personality Disorder in forensic inpatient settings. This presentation will briefly describe forensic treatment settings in California selected for the DBT program, outline the barriers and successes in implementing such a program, and discuss patient, provider, and institutional response to the start of such a program.

2. **Big Sur** **PART 1 Integration of Structured Risk Assessment into Clinical Practice**

CEU

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CME

Sarah L. Desmarais, PhD, Assistant Professor, North Carolina State University

Mental health professionals must assess the risk their clients pose to themselves and others as a matter of daily practice. Over the last 30 years, there have been advances in assessing the risk of violence associated with behavioral health problems; however, important limitations remain. First, many instruments emphasize static or historical risk factors, such as sex, age or history of violence. Second, there has been little consideration of protective factors that may serve to reduce risk (e.g., treatment compliance, coping skills, social support) or dynamic factors that may be amenable to treatment (e.g., psychotic symptoms, substance use, affect). Third, there has been a focus on long-term violence risk to the neglect of other risks and time frames that may be more relevant clinical practice.

This presentation will provide training on the integration of structured approaches to violence risk assessment into clinical practice, with a particular focus on the use of the structured professional judgment approach and the application of the Risk-Need-Responsivity model of treatment and rehabilitation. Part 1 will provide an overview to the science and practice of violence risk assessment and describe the rationale and evidence for using the structured professional judgment approach in clinical practice. Part 2 will focus on communication of findings and the importance of ongoing assessment over time for monitoring and treatment amendment. Participants will have the opportunity to apply this knowledge to individual cases.

Meeting Room map on back cover

**3. Ballroom
I/II/III**

CEU
MCEP
MCLE
CME

A Potential Full Court Press: Some of the Forensic Implications of the Transition to the DSM-5

Glenn Lipson, PhD, Program Director/Professor, CA School of Forensic Studies, Alliant International University

Moving from the DSM-IV TR to the DSM-5 creates a time of uncertainty in terms of comparability and acceptance by the court. Changes in the DSM-5 will be explored in relationship to legal considerations that may arise for evaluators, treaters and expert witnesses. One of the goals of the presentation is to create dialogue and encourage audience participation, as together we are all heading into this new territory. General issues with diagnosis and reliability will also be discussed.

4. Cypress

CEU
MCEP
MCLE
CME

PART 1 Forensic Report Writing in Sex Offender Cases

Philip Witt, PhD, ABPP, Private Practice

This workshop is designed for mental health professionals who prepare sex offender evaluation reports. Topics to be addressed include: guiding principles for report organization and structure, distinctions between forensic and therapeutic evaluations, and elements of good reports. Participants were encouraged to submit their own reports to the presenter prior to the workshop for review and feedback (time permitting) during the training. No identifying information will be used in discussing submitted reports to ensure its author's anonymity.

**5. Ballroom
IV/V/VI**

CEU
MCEP
CME
POST

PART 1 Treatment of Violent Delinquents with Psychopathic Features

Michael Caldwell, PsyD, Lecturer, University of Wisconsin-Madison

In every state, a small number of particularly violent and intractable juvenile delinquents absorb a disproportionate amount of rehabilitation resources and account for an excessive number of violent crimes. Many of these juveniles show early indications of psychopathic features and many continue to commit violent crimes into adulthood. This workshop will describe the Mendota Juvenile Treatment Center, an innovative approach to these youth that has proven successful at reducing violent recidivism, even among youth with significant psychopathic features. It will describe the philosophy and structure of the program, and review studies which have shown the program reduces violent recidivism by half among treated youth and returns \$7 for every dollar spent on the program in the form of criminal justice cost savings.

SPECIAL MEMBER BENEFITS

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1. Ballroom Growing Older in Custody

I/II/III

CEU

MCEP

CME

John Chamberlain, MD, Assistant Director, Psychiatry and the Law Program; Associate Clinical Professor of Psychiatry, UC San Francisco Department of Psychiatry

This presentation will begin with a discussion of the changing demographics of the correctional population. The number of older prisoners, for example, is rising while the overall prison population has decreased. This change in the population make-up in correctional settings will have impacts on the cost of providing medical and psychiatric care in such settings as well as on the types of conditions requiring treatment. We will explore examples of conditions that will be expected to become more common in correctional settings as the population in these facilities ages. The presentation will then move to a discussion of the mental health issues affecting older incarcerated individuals. There is evidence, for instance, that depression is common in older inmates serving long sentences. Interestingly, there is also evidence that the depression is related to physical health issues rather than the effects of incarceration. We will next explore issues related to safety and security in institutions housing older prisoners. For example, older individuals may be at a higher risk of victimization in correctional settings than younger or healthier individuals. Providing adequate safeguards to minimize the risk of victimization in this population will be challenging in the correctional setting. Finally, the presentation will conclude with a discussion of possible interventions to better identify and address the treatment needs of the older, incarcerated population.

2. Big Sur

CEU

MCEP

CME

PART 2 Integration of Structured Risk Assessment into Clinical Practice

Sarah L. Desmarais, PhD, Assistant Professor, North Carolina State University

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Meeting Room map on back cover

3. Spyglass

CEU
MCEP
MCLE
CME

Trying to Bring Sanity to Insanity

Alex Landon, JD, Attorney

The presentation will explore the process by which one is found not guilty by reason of insanity. Use of mental health experts, and their involvement in the sanity proceedings will also be discussed. Alternative dispositions to actually entering a not guilty plea will be explored. Finally, placement, treatment, and conditional release will be covered.

4. Cypress

CEU
MCEP
MCLE
CME

PART 2 Forensic Report Writing in Sex Offender Cases

Philip Witt, PhD, ABPP, Private Practice

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5. Ballroom IV/V/VI

CEU
MCEP
CME
POST

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Michael Caldwell, PsyD, Lecturer, University of Wisconsin-Madison

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5:00 pm Ballroom I/II/III

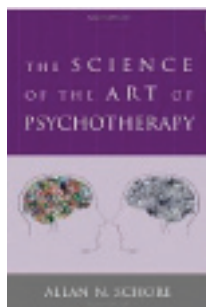


ANNUAL FMHAC BUSINESS MEETING

Non-members are encouraged to attend but only current members may vote.

Board of Directors Elections:

Secretary, Director of Conference, Director of Education



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Win a signed copy of Dr. Allan Schore's book The Science of the Art of Psychotherapy

FMHAC Business Meeting
5pm, Thursday, March 20th
Ballroom I/II/III

FRIDAY, MARCH 21

Room check out at the Hyatt is 12:00 noon.

7:30 - 8:30 am Continental Breakfast

8:30am - 12noon (3.0 CE hrs)

Main Ballroom	The DSM-5 and the Law: A Forensic Focus
CEU	Charles Scott, MD, Professor of Clinical Psychiatry, UC Davis Medical Center
MCEP	Dr. Scott will highlight the evolution of the DSM with significant changes noted from the DSM-IV-TR to the DSM-5 summarized. Key diagnostic changes in the DSM-5 and their implications for forensic assessment will be reviewed with practical vignettes presented to emphasize major points. Suggestions for writing forensic diagnoses as a structure to replace the DSM-IV-TR Axial system will be provided. Key tips for testifying in court on issues relevant to the DSM-5 will be demonstrated.
MCLE	
CME	
Ballroom I/II/III	Contemporary Thinking and Approaches to Working with Sexually Abusive Youth
CEU	Phil Rich, EdD, LICSW, Consultant/Trainer
MCEP	This workshop will discuss contemporary thinking regarding treatment for sexually abusive youth, and will review recent empirical and clinical/theoretical literature that helps establish current directions in and approaches to treatment. This includes a shift to a developmentally-sensitive and relational approach to treatment and treatment that is holistic, multidimensional, and collaborative, aimed at rehabilitation and personal change. The workshop will also include case examples as a means for better understanding the actual application of ideas in treatment.
CME	
POST	

REMINDERS

- Make sure you get your CEU Sign In/Out Form signed by an FMHAC Board Member on your way out.
- Please fill out the College Registration Form given to you when you checked in!
- The Evaluation Survey will be emailed to you - please make sure you fill it out.
- Certificates of Attendance are included in your conference packet.

Remember to complete the Electronic Evaluation Survey!

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CONTINUING EDUCATION

Find your licence type below and follow the instructions to receive CE credit. It is recommended that you use the Sign In/Out form provided in your conference packet to ensure FMHAC has a record of your session attendance.

Don't forget to be signed in and out of your sessions. DO NOT ask FMHAC to sign for a session outside the meeting room of that class, after a class has started, or before a class has ended. We can't put our CE providership in jeopardy!

CEU - All Workshops Approved

BBS/BRN (MFT, LCSW, RN, NP, LVN, Psych Tech)

BBS provider #PCE 4800, BRN provider #CEP 5965

Fill out the Evaluation Survey to receive credit. Remember, the Evaluation is electronic this year and will be emailed to you on the final day of the conference.

We recommend you utilize the Sign In/Out form provided in your conference packet.

MCEP (Psychologists) - All Workshops Approved

CPA OPD provider #FOR005

Complete the following forms and turn them in at the registration table at the end of the conference to receive credit.

1. Sign In/Out form (duplicate form). One form is provided to each attendee for the entire conference. Make sure to obtain FMHAC initials at each workshop you attend and that a member of the FMHAC Board signs the form at the end of the conference. Maintain your yellow copy.
2. Fill out the Evaluation Survey to receive credit. Remember, the Evaluation is electronic this year and will be emailed to you on the final day of the conference.

CE Statement: FMHAC is approved by the California Psychological Association to provide continuing professional education for psychologists. FMHAC maintains responsibility for this program and its content.

MCLE - See Courses Marked MCLE

CA State Bar Provider #15388

Fill out the Evaluation Survey to receive credit. Remember, the Evaluation is electronic this year and will be emailed to you on the final day of the conference.

We recommend you utilize the Sign In/Out form provided in your conference packet.

Selected Sessions:

Amy Phenix, PhD

Behr/Heggarty

Pratt/Groman/Hernandez

Janet Warren, DSW

Alan Stillman, LCSW

Philip Witt, PhD

Glenn Lipson, PhD

Alex Landon, Esq

Charles Scott, MD

POST - See Courses Marked POST

POST units have been approved for selected sessions, #2540-28000-13014. 20 hours have been approved, but with some sessions are concurrent so 14 hours are possible.

Sign the POST attendance sheet at each session to receive credit.

Selected Sessions:

Alan Schore PhD	Steve Rosenberg	Michael Caldwell, PsyD
Behr/Heggarty	Raymond Scott, PhD	Phili Rich, EdD, LCSW
Pratt/Groman/Hernandez	Alan Stillman, LCSW	

CME - See Courses Marked CME

12 CME units for selected sessions have been approved.

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Selected Sessions:

Allan Schore, PhD	Janet Warren, DSW	John Chamberlain, MD
Steve Rosenberg	Peggy Webb, MA	Alex Landon, Esq
Raymond Scott, PhD	Alan Stillman, LCSW	Charles Scott, MD
Philip Witt, PhD	Michael Caldwell, PsyD	Phil Rich, EdD, LCSW
Glenn Lipson, PhD	Sarah Desmarais, PhD	
Sam Himmelstein, PhD	Adrienne DiFabio, PhD	

CME Statements: This activity has been planned and implemented in accordance with the Essential Areas and policies of the Institute for Medical Quality/California Medical Association (IMQ/CMA) through the joint sponsorship of SCVMC and FMHAC. The SCVMC is accredited by the Institute for Medical Quality/California Medical Association (IMQ/CMA) to provide continuing medical education for physicians. The SCVMC designates this Live Activity for a maximum of 12 AMA PRA Category 1 Credit(s). Physicians should claim only the credit commensurate with the extent of their participation in the activity. This credit may also be applied to the CMA Certification in Continuing Medical Education.

Conflict of Interest Statement: Presenters for CME courses were screened for conflicts of interest and any conflicts were resolved by review of CME activity content, e.g. slides, by the Conference Planning Committee CME Chair, who has no conflict of interest.

STC - Special Certification

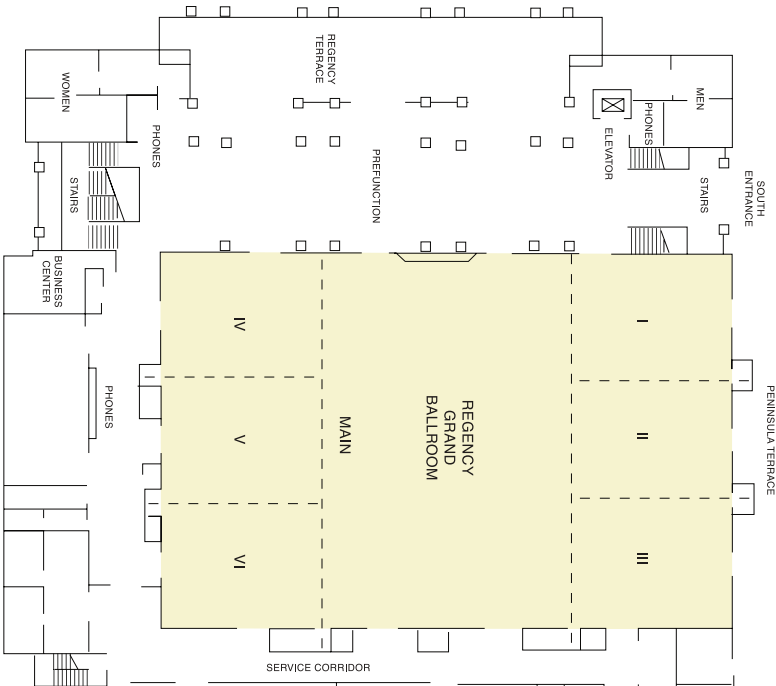
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