

Alabama Council for Behavioral Healthcare

2025 Fall Conference - November 5, 2025

Birmingham, AL

Continuing Education Application & Attendance Log

Instructions:

- ✓ Daily: Sign-in upon arrival, and sign-out at departure at tables located in registration area.
 - Check (✓) which workshops you attend in the space provided below
 - Complete an evaluation form for each workshop you attend. Evaluation forms included in this CE PACKET
- ✓ Mail your completed CE packet to **The Institute for Continuing Education** at the address listed below
- ✓ There is no fee to make application for CE credit – CE Credit is offered by session

Important:

- ✓ CE verification will be mailed to the address listed below in approximately 2 weeks after receipt of completed application
- ✓ All Conference attendees are responsible for determining if CE credit offered by The Institute for Continuing Education will meet regulations of their licensing/certification board
- ✓ CE credit is not available for any event not listed on the workshop session listed below
- ✓ CE credit is not "academic" and may not be used toward completion of a degree.
- ✓ CE credit is offered for: (1) Psychology (APA); (2) Counseling / MFT (NBCC has approved this program); Social Work (AL Board SW provider 0171, expiration 06/2026); Nursing (AL Board Nursing provider 1124, expiration 03/2026).

Return this completed packet to: The Institute for Continuing Education prior to Dec. 31, 2025.

MAIL TO:

Linda C. Lakeman
The Institute for Continuing Education,
P. O. Box 449, Montevallo, AL 35115
email: instconted@aol.com

1. Please complete the information below: PRINT CLEARLY

Attendee Name: _____

Mailing Address: _____

City, State, Zip: _____

Email: _____ Phone: _____

2. I request continuing education credit verification in the professional discipline(s) of:

_____ Psychology _____ Social Work _____ Counseling _____ MFT _____ Nursing

State(s) in which you are licensed: _____ License Number: _____
(Will be included on certificate, if provided)

3. Check Workshops Attended: **Each workshop offers 1.50 CE hrs.**

Workshop 1: 8:30 – 10:00 a.m. _____ Generational Trauma _____ When is Behavior Something More?
Margaret Canter, PhD Jennifer Sheehy-Knight, PhD

Workshop 2: 10:15-11:45 a.m. _____ Making the Most of Clinical Supervision _____ Mental Health Concerns
David P. Cecil, PhD Stacy Ladden, PsyD

Workshop 3: 12:45-2:15 p.m. _____ From Crisis to Connection _____ The Why and How for Intellectual Disabilities
John T. Bayles, M.Ed. Jeff Capobianco, PhD.

Workshop 4: 2:30-4:00 p.m. _____ Behavioral and Physical Health _____ Medications for Behavioral
Jeff Capobianco, Ph.D. Andrea Thomas, Ph.D.

I hereby apply for continuing education credit. I understand that to be eligible for continuing education credit, I must comply with sign-in and sign-out requirements, complete an evaluation of each session I attend. I also understand that it is my responsibility to determine if CE offered by The Institute for Continuing Education will meet the regulations of my licensing/certification board.

4. Signature: _____ Date: _____

Workshop 1

8:30 – 10:00 a.m.

Instructions: Check the Session You are Evaluating____ ***Mental Health Track:*** Generational Trauma____ ***Developmental Disabilities Track:*** When is Behavior Something More?

Indicate your rating of the presentation in the categories below by circling the appropriate number, using a scale of 1 (low) through 5 (high)

	<i>HIGH</i>	<i>Neutral</i>	<i>LOW</i>	
I. Content / Relevancy / Teaching Methods:				
a) Content was appropriate for intended audience	5	4	3	2 1
b) Content was consistent with stated learning objectives	5	4	3	2 1
c) Content included recent studies/findings/literature on topic	5	4	3	2 1
d) Teaching methods were appropriate and effective for subject matter	5	4	3	2 1
e) This program is appropriate to my education, experience, and skills level	5	4	3	2 1
f) Cultural, racial, ethnic, socio-economic, and gender differences were considered	5	4	3	2 1
g) Visual aids, handouts, and oral presentations clarified content and were useful	5	4	3	2 1
h) Content was useful, applicable to practice, and enhanced my professional development	5	4	3	2 1
i) I did not perceive any commercial bias or conflict of interest	5	4	3	2 1
j) Information could contribute to achieving personal and professional goals	5	4	3	2 1
k) Timeline of course adhered to the advertised time, and CE credits offered	5	4	3	2 1
l) I would recommend this program to others	5	4	3	2 1

II. Learning Objectives: Stated Learning Objectives were met:				
<u>Generational Trauma: Understanding What It Is, Who It Affects</u>				
1. Define generational trauma and identify who it affects	5	4	3	2 1
2. Identify at least 2 strategies to address generational trauma in treatment with difficult patient populations	5	4	3	2 1
3. Describe a building technique to strengthen the parent-child relationship	5	4	3	2 1
<u>When Is Behavior Something More? How to Better Identify Dual Diagnosis</u>				
1. Recognize common comorbid diagnosis in the neurodevelopmental disability (NDD) population, particularly in children and adolescents	5	4	3	2 1
2. Demonstrate an understanding of common symptoms in the NDD population that overlap mental health conditions	5	4	3	2 1
3. Recognize at least 2 indicators of mental health diagnosis in the NDD population And feel more comfortable with knowing when to refer for further assessment	5	4	3	2 1

HIGH NEUTRAL LOW

III. Faculty: *Margaret F. Canter, Ph.D. – Mental Health Track*

Jennifer L. Sheehy-Knight, Ph.D. – Developmental Disabilities Track

a) Knowledgeable in content areas						
b) Presented the subject matter clearly and clarified content	5	4	3	2	1	
c) Responsive to participants and to their questions	5	4	3	2	1	
d) Used technology effectively	5	4	3	2	1	
e) Reviewed limitations to material presented	5	4	3	2	1	
f) Described severe and most common risks, including applicable risk of medications	5	4	3	2	1	N/A

IV. Overall Rating:

a) Conference facility was adequate and location was suitable for training	5	4	3	2	1
b) This session met or exceeded my expectations	5	4	3	2	1
c) How much did you learn as a result of this CE program	a great deal		some	very little	
d) How useful was the content of this CE program for your practice and other professional development	extremely useful			not useful	

V. Logistics / Technology / Administration:

a) Conference facility was adequate and location was suitable for training	5	4	3	2	1
b) Visual and technology aids were up-to—date and adequately administered	5	4	3	2	1
c) Course/ training registration was user-friendly and event was well managed	5	4	3	2	1
d) Instructions for requesting accommodations for a disability were clear	5	4	3	2	1
e) Questions or concerns were addressed effectively and in a timely manner with regard to administration of the course/ training	5	4	3	2	1

VI. Comments About This Training:

Workshop 2

10:15 – 11:45 a.m.

Instructions: Check the Session You are Evaluating

_____ ***Mental Health Track:*** Making the Most of Clinical Supervision: Bridging Generations, Disciplines, and Standards

_____ ***Developmental Disabilities Track:*** Mental Health Concerns and Incorporating a *Conscious Discipline Approach*

Indicate your rating of the presentation in the categories below by circling the appropriate number, using a scale of 1 (low) through 5 (high)

HIGH *Neutral* *LOW*

I. Content / Relevancy / Teaching Methods:

a) Content was appropriate for intended audience	5	4	3	2	1
b) Content was consistent with stated learning objectives	5	4	3	2	1
c) Content included recent studies/findings/literature on topic	5	4	3	2	1
d) Teaching methods were appropriate and effective for subject matter	5	4	3	2	1
e) This program is appropriate to my education, experience, and skills level	5	4	3	2	1
f) Cultural, racial, ethnic, socio-economic, and gender differences were considered	5	4	3	2	1
g) Visual aids, handouts, and oral presentations clarified content and were useful	5	4	3	2	1
h) Content was useful, applicable to practice, and enhanced my professional development	5	4	3	2	1
i) I did not perceive any commercial bias or conflict of interest	5	4	3	2	1
j) Information could contribute to achieving personal and professional goals	5	4	3	2	1
k) Timeline of course adhered to the advertised time, and CE credits offered	5	4	3	2	1
l) I would recommend this program to others	5	4	3	2	1

II. Learning Objectives: Stated Learning Objectives were met:

<u>Making the Most of Clinical Supervision</u>					
1. Identify key ethical best practices and models of supervision, including developmental frameworks and reflective techniques, within behavioral health contexts	5	4	3	2	1
2. Identify at least 2 culturally responsive supervision relationships that promote equity, inclusion, and intergenerational dialogue	5	4	3	2	1
3. Describe strategies that effectively manage discrepancies between supervisee and Supervisor preferred models for practice (mutual education and training)	5	4	3	2	1
<u>Mental Health Concerns and Incorporating a Conscious Discipline Approach</u>					
1. Articulate a basic understanding of the term, <i>Conscious Discipline</i>	5	4	3	2	1
2. Identify at least 2 behaviors in terms of the <i>Conscious Discipline</i> brain-state Model including identifying a personal perception of behavior	5	4	3	2	1
3. Identify at least 2 discipline and strategies to develop safety, connection, choice, assertiveness, noticing, giving effective feedback, routines and expectations, calming corners, reward systems, and problem solving	5	4	3	2	1

HIGH NEUTRAL LOW

III. Faculty: *David P. Cecil, Ph.D., LICSW – Mental Health Track*
Stacy Ladden, Psy.D. – Developmental Disabilities Track

a) Knowledgeable in content areas						
b) Presented the subject matter clearly and clarified content	5	4	3	2	1	
c) Responsive to participants and to their questions	5	4	3	2	1	
d) Used technology effectively	5	4	3	2	1	
e) Reviewed limitations to material presented	5	4	3	2	1	
f) Described severe and most common risks, including applicable risk of medications	5	4	3	2	1	N/A

IV. Overall Rating:

a) Conference facility was adequate and location was suitable for training	5	4	3	2	1
b) This session met or exceeded my expectations	5	4	3	2	1
c) How much did you learn as a result of this CE program	a great deal		some	very little	
d) How useful was the content of this CE program for your practice and other professional development	extremely useful			not useful	

V. Logistics / Technology / Administration:

a) Conference facility was adequate and location was suitable for training	5	4	3	2	1
b) Visual and technology aids were up-to—date and adequately administered	5	4	3	2	1
c) Course/ training registration was user-friendly and event was well managed	5	4	3	2	1
d) Instructions for requesting accommodations for a disability were clear	5	4	3	2	1
e) Questions or concerns were addressed effectively and in a timely manner with regard to administration of the course/ training	5	4	3	2	1

VI. Comments About This Training:

Workshop 3

12:45 – 2:15 p.m.

Instructions: Check the Session You are Evaluating**_____ *Mental Health Track:* From Crisis to Connection: Emerging Strategies in Harm Reduction****_____ *Developmental Disabilities Track:* The Why and How for Intellectual and Developmental Disability Providers in 2025**

Indicate your rating of the presentation in the categories below by circling the appropriate number, using a scale of 1 (low) through 5 (high)

HIGH Neutral LOW

I. Content / Relevancy / Teaching Methods:

a) Content was appropriate for intended audience	5	4	3	2	1
b) Content was consistent with stated learning objectives	5	4	3	2	1
c) Content included recent studies/findings/literature on topic	5	4	3	2	1
d) Teaching methods were appropriate and effective for subject matter	5	4	3	2	1
e) This program is appropriate to my education, experience, and skills level	5	4	3	2	1
f) Cultural, racial, ethnic, socio-economic, and gender differences were considered	5	4	3	2	1
g) Visual aids, handouts, and oral presentations clarified content and were useful	5	4	3	2	1
h) Content was useful, applicable to practice, and enhanced my professional development	5	4	3	2	1
i) I did not perceive any commercial bias or conflict of interest	5	4	3	2	1
j) Information could contribute to achieving personal and professional goals	5	4	3	2	1
k) Timeline of course adhered to the advertised time, and CE credits offered	5	4	3	2	1
l) I would recommend this program to others	5	4	3	2	1

II. Learning Objectives: Stated Learning Objectives were met:**From Crisis to Connection: Emerging Strategies in Harm Reduction**

1. Recognize and identify at least 2 of the current harm reduction tools and practices that help keep people safer and connected to care	5	4	3	2	1
2. Explain how system navigation supports – like peer specialists and telehealth - make it easier to access treatment and recovery resources	5	4	3	2	1
3. Identify at least two challenges people face in getting help and identify at least one way A community can expand supportive solutions	5	4	3	2	1

The Why and How for Intellectual and Developmental Disability Providers in 2025

1. Explain the need for integration and coordination of behavioral health and physical health services for people with intellectual and developmental disabilities is necessary	5	4	3	2	1
2. Identify how the Certified Community Behavioral Health Clinic (CCBHC) model is different than traditional community mental health service approaches with a focus on the whole person	5	4	3	2	1
3. Describe the use of the Comprehensive Health Integration Model (CHI) as a means of assessing and developing a plan for health services integration	5	4	3	2	1

HIGH NEUTRAL LOW

III. Faculty: *John T. Bayles, M.Ed. – Mental Health Track*
Jeff Capobianco, Ph.D. – Developmental Disabilities Track

a) Knowledgeable in content areas						
b) Presented the subject matter clearly and clarified content	5	4	3	2	1	
c) Responsive to participants and to their questions	5	4	3	2	1	
d) Used technology effectively	5	4	3	2	1	
e) Reviewed limitations to material presented	5	4	3	2	1	
f) Described severe and most common risks, including applicable risk of medications	5	4	3	2	1	N/A

IV. Overall Rating:

a) Conference facility was adequate and location was suitable for training	5	4	3	2	1
b) This session met or exceeded my expectations	5	4	3	2	1
c) How much did you learn as a result of this CE program	a great deal		some	very little	
d) How useful was the content of this CE program for your practice and other professional development	extremely useful			not useful	

V. Logistics / Technology / Administration:

a) Conference facility was adequate and location was suitable for training	5	4	3	2	1
b) Visual and technology aids were up-to—date and adequately administered	5	4	3	2	1
c) Course/ training registration was user-friendly and event was well managed	5	4	3	2	1
d) Instructions for requesting accommodations for a disability were clear	5	4	3	2	1
e) Questions or concerns were addressed effectively and in a timely manner with regard to administration of the course/ training	5	4	3	2	1

VI. Comments About This Training:

Workshop 4**2:30 – 4:00 p.m.*****Instructions: Check the Session You are Evaluating*****_____ *Mental Health Track:* Behavioral and Physical Health Integration****_____ *Developmental Disabilities Track:* Medications for Behaviors in the Intellectually Disabled**

Indicate your rating of the presentation in the categories below by circling the appropriate number, using a scale of 1 (low) through 5 (high)

	<i>HIGH</i>	<i>Neutral</i>	<i>LOW</i>		
I. Content / Relevancy / Teaching Methods:					
a) Content was appropriate for intended audience	5	4	3	2	1
b) Content was consistent with stated learning objectives	5	4	3	2	1
c) Content included recent studies/findings/literature on topic	5	4	3	2	1
d) Teaching methods were appropriate and effective for subject matter	5	4	3	2	1
e) This program is appropriate to my education, experience, and skills level	5	4	3	2	1
f) Cultural, racial, ethnic, socio-economic, and gender differences were considered	5	4	3	2	1
g) Visual aids, handouts, and oral presentations clarified content and were useful	5	4	3	2	1
h) Content was useful, applicable to practice, and enhanced my professional development	5	4	3	2	1
i) I did not perceive any commercial bias or conflict of interest	5	4	3	2	1
j) Information could contribute to achieving personal and professional goals	5	4	3	2	1
k) Timeline of course adhered to the advertised time, and CE credits offered	5	4	3	2	1
l) I would recommend this program to others	5	4	3	2	1

II. Learning Objectives: Stated Learning Objectives were met:					
<u>Behavioral and Physical Health Services Integration</u>					
1. Explain the need for integration and coordination of behavioral health and physical health services for people with intellectual and developmental disabilities	5	4	3	2	1
2. Identify how the Certified Community Behavioral Health Clinic (CCBHC) model is different than traditional community mental health service approaches with a focus on the whole person care approach	5	4	3	2	1
3. Describe the use of the Comprehensive Health Integration Model (CHI) as a means of assessing and developing a plan for health services integration	5	4	3	2	1
<u>Medications for Behaviors in the Intellectually Disabled</u>					
1. Articulate the major categories of medications use for behavioral interventions	5	4	3	2	1
2. Explain how these medications achieve the goal of reducing behaviors	5	4	3	2	1
3. List the major side effects of the medication groups as a whole to look out for and what may be behavioral issues that can arise from using psychotropic medications	5	4	3	2	1

HIGH NEUTRAL LOW

III. Faculty: *Jeff Capobianco, Ph.D. – Mental Health Track*
Andrea Thomas, Ph.D. – Developmental Disabilities Track

a) Knowledgeable in content areas						
b) Presented the subject matter clearly and clarified content	5	4	3	2	1	
c) Responsive to participants and to their questions	5	4	3	2	1	
d) Used technology effectively	5	4	3	2	1	
e) Reviewed limitations to material presented	5	4	3	2	1	
f) Described severe and most common risks, including applicable risk of medications	5	4	3	2	1	N/A

HIGH NEUTRAL LOW

IV. Overall Rating:

a) Conference facility was adequate and location was suitable for training	5	4	3	2	1
b) This session met or exceeded my expectations	5	4	3	2	1
c) How much did you learn as a result of this CE program	a great deal		some	very little	
d) How useful was the content of this CE program for your practice and other professional development	extremely useful			not useful	

V. Logistics / Technology / Administration:

a) Conference facility was adequate and location was suitable for training	5	4	3	2	1
b) Visual and technology aids were up-to—date and adequately administered	5	4	3	2	1
c) Course/ training registration was user-friendly and event was well managed	5	4	3	2	1
d) Instructions for requesting accommodations for a disability were clear	5	4	3	2	1
e) Questions or concerns were addressed effectively and in a timely manner with regard to administration of the course/ training	5	4	3	2	1

VI. Comments About This Training:
