



Care Coordination Collaborative Learning Session 2: Speaker Biographies



Marc Avery is Clinical Associate Professor and Associate Director for Clinical Services at the AIMS Center, University of Washington School of Medicine. Dr. Avery has over 20 years of experience in the development and oversight of integrated behavioral health services focusing on community mental health settings. After serving many years as medical director and administrator at a regional community mental health center, he joined the faculty of in 2012 to intensify his focus on collaborative models of care. Dr. Avery received his Medical Degree from Wayne State University in Detroit, and completed a psychiatric residency at the University of California, San Francisco.

Gale Bataille is an emeritus County Mental Health/Behavioral Health Director and now works as an independent consultant with the California Institute for Mental Health. She is the CiMH principal consultant for the CiMH Mental Health Leadership Institute offered annually through a partnership with USC. While serving as the CiMH principal consultant for Integration Projects, Gale directed the CiMH CalMEND Program including the CalMEND Mental Health/Primary Care Integration Pilot Collaborative that concluded in fall, 2011. Currently, she is director for a second pilot collaborative on Primary Care/Mental Health/Substance Use Services integration, the Care Integration Collaborative (CIC). Gale has provided consultation to the California Mental Health Directors Association focused on correctional mental health issues. Gale also serves on the Board of Mental Health Consumer Concerns, Inc.—the oldest consumer run organization in the US. Gale retired as Mental Health/Behavioral Health and Recovery Services Director for San Mateo County in January of 2008 and worked in Solano County and Contra Costa Counties as Mental Health Director/Assistant Director beginning in 1981. Gale has been active in state policy issues with the California Mental Health Directors Association and the California Institute for Mental Health and has served on the Boards and as President of both organizations. She has been a Fellow of ACMHA-The College for Behavioral Health Leadership since 1997. Gale has a BA from Oberlin College and an MSW from San Francisco State College, School of Social Work.

Jennifer Clancy, MSW has been working in the field of mental health since 1990. She started as a counselor at Fred Finch, a residential treatment center in East Oakland, CA. After graduating from the San Francisco State University School of Social Work in 1993, Ms. Clancy dedicated her career to reducing racial disparities in mental health, consumer and family member mental health advocacy, and policy development to support mental health systems transformation. She has worked as a clinician at the University of New Mexico, and latter as an Executive Director of nonprofit and governmental agencies. The agencies where she served as the director were dedicated to advocacy, improved outcomes for clients of the mental health system, and sustainable community development. Ms. Clancy moved to California in 2000 to accept the position of Executive Director of United Advocates for Children of California. After



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leaving the advocacy agency, she served as the first Executive Director of the Mental Health Services Oversight and Accountability Commission. Later, she assumed an Interim Executive Director position at Village Care International, Inc., an organization dedicated to building volunteer driven, children's systems of care in Kenya and Nigeria. Currently, Ms. Clancy works as a contractor for the California Institute for Mental Health where she oversees implementation of a number of special projects at the local and statewide levels.

Connie Davis is a nurse practitioner specializing in care of the elderly and the Program Director of the non-profit Centre for Collaboration, Motivation, and Innovation (CCMI). CCMI provides expertise in a stepped-care approach to self-management support, including training health care professionals, reaching out to the public and designing patient-centered care systems. Connie is a trainer of master educators for the Stanford Chronic Disease Self-Management Program, a member of the Motivational Interviewing Network of Trainers and adjunct clinical faculty for the University Of British Columbia School Of Nursing. Connie is a fellow at the Center for Advancing Health based in Washington DC, an organization that focuses on increasing patient engagement in health and health care. Connie was the quality improvement lead for Patients as Partners in British Columbia and clinical director at the MacColl Institute for Healthcare Innovation that developed the Chronic Care Model. The focus of Connie's work is on improving interactions between clinicians, patients and families. She is the author or co-author of publications on health promotion, chronic illness care, quality improvement, and self-management support. Connie is a frequent speaker and trainer on self-management support, motivational interviewing, health behavior change, and health literacy, clinical topics in geriatrics, geriatric nursing, and quality improvement in outpatient care both nationally and internationally. Connie is particularly interested in developing sustainable training programs and patient-centered systems of care.

Dale Jarvis is the founder of Dale Jarvis and Associates LLC, a Seattle-based consulting firm. Mr. Jarvis has extensive experience helping health plans and healthcare providers redesign their organizations to achieve better health for the populations they serve, better care for individuals, and reduced costs. He has contributed articles to publications and is a co-author of two books on healthcare system redesign. Mr. Jarvis has been a certified public accountant in the State of Washington and a member of the American Institute of Certified Public Accountants since 1982. Currently Mr. Jarvis is focusing on healthcare reform to help ensure that the needs of persons with mental health and substance use disorders are addressed as reform unfolds. This includes working with states, health plans, regional authorities, and at a national level to develop strategies that align the mental health and substance use safety net systems with general healthcare reform efforts.



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Gerald J. Langley is a statistician, author, and consultant Associates in Process Improvement (API). He earned his B.S. degree (1973) in mathematics at the University of Texas at Austin, and his M.S. degree (1975) in statistics at North Carolina State University. He became a principle of Associates in Process Improvement (API) in 1985. Before joining API, he worked at Hewlett Packard Corporation as a statistician and manager. Langley's main focus in both his consulting work and his research is helping organizations make improvements more rapidly and effectively. His expertise with data and computers plays a key role in this work. He has published articles on sampling and survey design, modeling, and fundamental improvement methods. He is a coauthor of *The Improvement Guide*. Langley has been the keynote speaker at numerous conferences and seminars, where his talks have ranged from technical applications in statistics to the more general area of accelerating improvement. Much of his work in the last 10 years has been focused on reducing health disparities in underserved populations. He has also contributed his time to the improvement efforts of several educational organizations, both at the state level and with individual schools. As a Senior Fellow of the Institute for Healthcare Improvement (IHI), Langley has served on the faculty of numerous improvement initiatives in areas such as improving medication safety, innovations in planned care, improving service in healthcare, and an initiative called the Triple Aim, which works with progressive health care organizations around the world to improve patient/family experience, population health, and reduce total costs, all at the same time. He has also supported a number of large scale improvement initiatives; the Health Disparities Collaborative sponsored by HRSA and Improving Patient Care for the Indian Health Service. He is currently designing and guiding the implementation of several pilot collaborative projects directed at improving care and outcomes for mental health services for the state of California.

Karen W. Linkins, PhD is the director of the Integrated Behavioral Health Project (IBHP) funded by the California Mental Health Services Act (CalMHSA) Stigma and Discrimination Reduction program, which aims to promote the spread of integrated behavioral health care in California through capacity building training, and technical assistance. Dr. Linkins is also the Co-Founder and Principal of Desert Vista Consulting (DVC), specializing in program evaluation, mental health services research, organizational development and coaching, and cultural competence assessment. She has led more than 50 research, evaluation, technical assistance, and strategic planning projects for Federal agencies, states, foundations, and community based organizations and clinics. Prior to founding DVC, Dr. Linkins was a Vice President at The Lewin Group, where she provided organizational and project leadership for over a decade, and served as a research faculty member at the University of California, San Francisco where she conducted research on health disparities, integrated care, and home and community based service systems. Dr. Linkins



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earned her PhD in Medical Sociology at the University of California, San Francisco and an undergraduate degree from Smith College.

Susan “Wynd” Novotny is Executive Director and founding member of the Board of Directors of Mendocino County’s peer wellness nonprofit, Manzanita Services incorporated in 2008. Graduating in psychology in the 1980’s followed by post-graduate work in psychology did not adequately prepare Wynd for her son’s first break in 2002. In 2004, Wynd put aside her 20-year old clothing design business to become a mental health advocate. Wynd served on the mental health board of Mendocino County through the Mental Health Services Act (MHSA) roll out, then as a client/family empowerment consultant for the county. Wynd’s passion for “healthy community” work lead her to being involved with the work of Manzanita Services as well as serving on the boards of NAMI Mendocino (National Alliance on Mental Health) and the Advisory board for Health and Human Services. In the past year Wynd has led Manzanita Services through becoming Medi-Cal certified in order to be able to provide peer care management for adults while continuing to explore the continued growth and development of Manzanita’s two wellness centers with her dedicated team.

Debra Rogers has been an Outreach worker since 2006. She has helped assist the homeless population to establish healthcare at the Hillside Health Clinic. Debra has also engaged the community as a Peer Specialist. She has participated in Housing Case Conference to assist the homeless with housing vouchers, and has helped in one on one peer listening while facilitating groups such as Women’s Group, and the Wellness Recovery Action Plan by Mary Ellen Copeland.

Lisa Smusz MS, LPCC is the Executive Director of Peers Envisioning and Engaging in Recovery Services (PEERS) in Oakland, Calif. She has 15 years of experience in the mental health field, working as a licensed Clinical Counselor, a university instructor, and as a project manager on large-scale projects in mental health, non-profit, and educational sectors across the Bay Area.

As a provider and consumer, Lisa is passionate about reducing the stigma surrounding mental health issues, promoting recovery model practices, and providing greater access to underserved populations. She is committed to changing the way the world views individuals who have had mental health struggles; she believes that everyone is entitled to support, hope, and self-empowerment.

Darren Urada is Principal Investigator and co-investigator on multiple studies on the integration of SUD services with primary care, mental health, and HIV/AIDS services. Dr. Urada also served as the Principal Investigator of California’s official statewide evaluation of the Substance Abuse and Crime Prevention Act of 2000 (aka Proposition 36). Prior to this work he was principal investigator on a grant to convene a meeting on the integration of SUD treatment with primary care that drew international experts from 23 countries as well as co-sponsorship from



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NIDA, SAMHSA, WHO, UNODC, and others. Dr. Urada's other work has included serving as project director for the California State Treatment Needs Assessment Program and for a study on substance abuse and welfare reform, and contributing to the California Treatment Outcome Project (CalTOP), meta-analytic studies on substance use and HIV/AIDS, and research on treatment expansion. Dr. Urada also served as a relapse prevention group facilitator at an outpatient treatment clinic on a volunteer basis for about one year. He has worked for the UCLA Integrated Substance Abuse Programs since 1998. Dr. Urada has authored over 75 chapters, reports, and peer reviewed journal articles.

Alice Washington is an associate at the California Institute for Mental Health. Ms. Washington was awarded a Bachelor's of Art degree from Stanford University during March of 1988. Her major was Sociology: Social Sciences. In the past few years, Ms. Washington has received a Train-the-Trainer Certificate from California State University, Sacramento. In 2013, Alice completed an A.S. in Graphic Design and is currently pursuing on a M.S. in Psychology. Ms. Washington has recovered from mental illness and maintains a productive and rich life. Alice views herself as a survivor and ex-consumer of public mental health services. Alice continues to include the voice of consumers in trainings, policy, and research. Alice also works to improve the public mental health and substance use systems' capacity to be culturally competent, recovery-oriented, and provide services that are community-based. Finally, Alice has skills in developing technology-based trainings.