

Substance Use Prevention and Treatment (SUPT) Lower Barrier Care Training FY 2025–2026

WHAT IS LOWER BARRIER CARE?

An approach to substance use disorder (SUD) treatment that prioritizes accessibility, flexibility, and dignity for individuals seeking support. It recognizes that each person's recovery journey is unique and seeks to reduce unnecessary obstacles to engagement.



WHO SHOULD ATTEND THE TRAINING?

All direct service staff who provide BHS SUPT services to Sacramento County members including Certified Medi-Cal Peer Support Specialists (CMPSS), their supervisors, and management are invited to attend this training.

FACILITATORS

- Elena Arroyo, LMFT
- Erica Cambern, LMFT
- Pamela Hawkins, LCSW
- Nai Saelee, ACSW

COURSE SCHEDULE

8:30am to 8:35am/1:00pm to 1:05pm:
Welcome and Introduction

8:35am to 10:30am/1:05pm to 3:00pm:
Training/Course Instruction

10:30am to 10:45am/3:00pm to 3:15pm:
Break

10:45am to 11:50am/3:15pm to 4:20pm:
Training/Course Instruction

11:50am to 12:00pm/4:20pm to 4:30pm:
Questions/Course Evaluations

COURSE DESCRIPTION

This free training will focus on building skills to create inclusive, inviting environments that promote easy and fair access to SUD treatment services. Participants will learn how to apply strength-based approaches and communication techniques to foster trust and empowerment. Emphasis will be placed on culturally responsive practices and maintaining positive engagement at every step, ensuring all individuals feel respected, valued, and supported throughout their experience.

COURSE OBJECTIVES

- Describe how stigma has historically impacted SUD treatment.
- Identify at least 3 ways that organizations can address stigma and barriers to community members accessing SUD treatment.
- Identify at least 2 actions that organizations can take to create a supportive and inviting environment within the stages of services (i.e., initial request for services, intake/screening/assessment, admission, treatment, care coordination, and discharge/transition).

CONTINUING EDUCATION (CE) CREDIT INFORMATION

No partial credit - You must attend the entire course to receive a certificate of attendance/CE credit.

- Course meets the qualifications for 3.0 hours of Continuing Education Credit for LMFTs/LCSWs/LPCCs and/or LEPs as required by the California Board of Behavioral Sciences (BBS). Sacramento County BHS is approved by the California Association of Marriage and Family Therapists (CAMFT) to be a continuing education provider (CAMFT Provider Number 129915).
- Course meets the qualifications for 3.0 hours of Continuing Education Credit for California Consortium of Addiction Programs and Professionals (CCAPP) CADCs and RADTs. Sacramento County BHS is approved by CCAPP to be a continuing education provider (CCAPP Provider Number 9-25-370-1027).
- Sacramento County BHS maintains responsibility for this program/course and its content.
- Certificates of attendance will be provided to all participants.
- Certificates of attendance and CEs will be distributed after the training upon completion of the pre-test, post-test, and course evaluation.

2026 TRAINING SCHEDULE

January

- Friday, January 30, 2026 (8:30am to 12:00pm)

February

- Monday, February 2, 2026 (1:00pm to 4:30pm)
- Friday, February 20, 2026 (8:30am to 12:00pm)

March

- Monday, March 23, 2026 (1:00pm to 4:30pm)
- Friday, March 27, 2026 (8:30am to 12:00pm)

April

- Friday, April 10, 2026 (8:30am to 12:00pm)
- Monday, April 13, 2026 (1:00pm to 4:30pm)

May

- Monday, May 4, 2026 (1:00pm to 4:30pm)
- Friday, May 8, 2026 (8:30am to 12:00pm)

June

- Monday, June 1, 2026 (1:00pm to 4:30pm)

REGISTRATION FORM

Instructions: Please submit your **completed** registration form to SUPTRAINING@saccounty.gov. You will receive a confirmation email once your registration has been processed. If we are unable to accommodate your request, then you will be notified. Virtual training log in information will be provided upon enrollment.

Name: _____

Agency & Program: _____

Job Title: _____

For LMFTs/LCSWs/LPCCs and/or LEPs, specify type & number: _____

For CADCs, specify type & number: _____

For RADTs, specify type & number: _____

SmartCare Classification (if applicable): _____

Telephone Number: _____

Email Address: _____

Requesting to register for the following training:

Training Name: _____ Date: _____

ADA and Interpreter Needs: The virtual meetings are accessible to people with disabilities.

Requests for accessible formats, interpreting services, or other accommodations may be made by calling the SUPT main line at (916) 875-2050 (CA Relay 711) or by emailing SUPTRAINING@saccounty.gov as soon as possible prior to the training.

Questions, Concerns, or Grievances: Quality training is our goal, please direct any questions, concerns, or grievances to SUPTRAINING@saccounty.gov.