Hello MARI Community,

Welcome to the Mary A. Rackham Institute (MARI) annual report for FY2023. I’m excited to share with you the impact that MARI has made in the past year — the lives we have touched, the services we have provided, and how we continue to address the growing need for mental health and language and literacy support at the University of Michigan and beyond.

This annual report is one way we are able to highlight the incredible work of our talented MARI staff and trainees. It also reflects the strength and resilience of the community members who seek our services. You’ll see on page 5 that we treated more than 1,250 clients in the past year. Our services continue to expand and evolve in order to meet the needs and expectations of those we serve.

You will also see how, through our extensive training programs, we are preparing our future clinicians and shaping the future of mental health and language and literacy services.

I took on the role of MARI Senior Director in July of 2023 (after 21 years at U-M’s Counseling and Psychological Services) and was familiar with MARI and the work that is done here. Yet, I continue to marvel at the depth and breadth of services the Institute offers to people of all ages, at all stages of life, from all backgrounds, and from a variety of presenting concerns.

Thank you for taking the time to learn more about MARI and the valuable services we offer. With my team, we look forward to continuing to provide compassionate, culturally humble, and evidence-based treatment to the diverse communities we serve, and to strengthening our partnerships across the U-M and beyond.

CHRISTINE ASIDAO, PH.D.
MARI Senior Director

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Do You Know MARI?

The Mary A. Rackham Institute (MARI) provides confidential, compassionate, and evidence-based clinical treatment for mental health and language and literacy concerns across the lifespan.

MARI consists of three clinics: the Psychological Clinic, the University Center for the Child and Family, and the University Center for Language and Literacy. We are a group of licensed mental health professionals, speech language pathologists, and advanced-level students providing compassionate and evidence-based clinical treatment to address mental health and language and literacy needs.

We offer expert mental health consultations, testing and evaluation, and longer-term individual, couples, group, and family-based therapy to U-M students, faculty, staff, their loved ones, and the broader community. Both telehealth and in-person options are available.

Our language and literacy offerings are diverse, including Enhancing your English Pronunciation workshops, one-on-one therapy, small group sessions, conversation hours, and intensive aphasia treatment.

This annual report is meant to provide a snapshot of MARI, to help you get to know us better — who we are, who we help, and the impact we have in the community.

MARI Services Include

Mental health:
- Therapy for individuals and couples
- Groups (DBT, Self-Compassion, ADHD skills, etc.)
- One-time Expert Consultations
- Testing for ADHD, Autism Spectrum Disorder (ASD), and other concerns
- ABA therapy for ASD
- Adult ASD workshops
- Parent support and training

Language and literacy:
- Language (U-M Aphasia Program)
- Free virtual social aphasia hours
- Reading and learning skills
- Support for non-native English speakers (Enhancing your English Pronunciation workshops)

Who we serve:
- U-M students, faculty and staff
- Children and their families
- Members of the general community
MARI Clinical Data Overview

This clinical data shows how MARI has been able to answer the needs of those in our community. That includes examining what services people were seeking to understand what is most in demand; their primary presenting concerns when contacting MARI; services MARI provided to clients during the year; and most common diagnoses. When connecting those dots, it starts to provide a more complete picture of how MARI is a crucial aspect of the community — as well as the common gaps that exist between the community’s mental health and language and literacy needs and the resources available to address them.

Top 6 Most Asked For Services

These initial inquiries are people who may or may not become clients. However, tracking and reporting our inquiries can help us understand where to focus resources, what programs we might need to expand, if community needs have evolved, etc. The data has also driven innovative approaches. For example, we soft launched a new service in FY23, Expert Consultations, to help clients gain access to mental health professionals sooner as many services like ASD testing are at capacity or have wait lists. Learn more on page 6.

Top Presenting Concerns

Anxiety, depression, difficulties with focus, sleep, time management, social relationships — these were the most pressing challenges reported by people seeking help at MARI in FY23. This word cloud indicates the different terms and phrases they used. The larger the word, the more frequently used overall.

This data is helpful in understanding how someone perceives mental health issues and/or the common language used around mental health.

It is interesting to compare and contrast this data with the diagnosis data to see where they align and where they deviate (see page 4).
MARI Clinical Data Overview Continued...

**Top 6 Services Provided in FY23**

Individual child therapy, testing for ADHD and learning disabilities, and individual adult therapy were the top services provided in FY23. Other top services included ASD testing and ABA therapy, group therapy, expert consultations, reading interventions, and aphasia speech-language therapy through the U-M Aphasia Program.

<table>
<thead>
<tr>
<th>Service</th>
<th>Percentage</th>
</tr>
</thead>
<tbody>
<tr>
<td>Child and Family-Based Therapy</td>
<td>27%</td>
</tr>
<tr>
<td>Testing (all but ASD)</td>
<td>26%</td>
</tr>
<tr>
<td>Adult Therapy</td>
<td>24%</td>
</tr>
<tr>
<td>ASD Testing</td>
<td>8%</td>
</tr>
<tr>
<td>Group Therapies</td>
<td>5%</td>
</tr>
<tr>
<td>Expert Consultations</td>
<td>5%</td>
</tr>
</tbody>
</table>

**Intensity as a factor in services provided**

The top services data above takes into account the *number of clients* served during the fiscal year. However, another useful way to consider how MARI serves our populations is to look at the *intensity* of treatment. Several of MARI’s hallmark programs, such as the ABA Therapy program and the U-M Aphasia Program take an intensive, individualized approach to helping clients succeed. Often they may see only 4-5 clients a week, but with multiple individual, group, and family-based appointments per day. At UM, for example, a standard week in the intensive, individualized in-person program means the client is in various therapy sessions for 25+ hours.

**MARI Primary Diagnoses in FY23**

Anxiety-related concerns and ADHD were the most frequent client diagnoses across all MARI services. That includes general anxiety disorders, unspecified anxiety disorders, social anxiety, panic disorders and others. While these were the *primary* diagnoses, it’s important to note that many mental health disorders co-occur, meaning if someone has anxiety, they may also present as having an adjustment disorder or depression, etc.

<table>
<thead>
<tr>
<th>Diagnosis</th>
<th>Percentage</th>
</tr>
</thead>
<tbody>
<tr>
<td>Anxiety Disorders</td>
<td>19%</td>
</tr>
<tr>
<td>ADHD</td>
<td>19%</td>
</tr>
<tr>
<td>Adjustment Disorders</td>
<td>17%</td>
</tr>
<tr>
<td>Autism Spectrum Disorder (ASD)</td>
<td>14%</td>
</tr>
<tr>
<td>Depression</td>
<td>9%</td>
</tr>
<tr>
<td>Other Diagnoses (grouped)</td>
<td>8%</td>
</tr>
<tr>
<td>PTSD</td>
<td>4%</td>
</tr>
<tr>
<td>Developmental Disorders</td>
<td>4%</td>
</tr>
<tr>
<td>Aphasia and Language Disorders</td>
<td>3%</td>
</tr>
</tbody>
</table>

**Diverse Treatments**

The diversity of presenting problems (see pg. 3) underscores the importance of having a *broad* diagnostic approach and the need for varied expertise.

*Note: An adjustment disorder is a strong reaction to stress or trauma, stronger than a typical response for that person, generally within three months of the event. A stressor can cause short-term symptoms that negatively affect a person’s thoughts, behaviors, and emotions. Several types of adjustment disorders are classified in the Diagnostic and Statistical Manual of Mental Illnesses (DSM-5).*
During Fiscal Year 2023, MARI Provided:

- 21,779 Appointments and Testing Sessions
- Average of 17 Appointments per client during the year
- 1270+ Clients with mental health and language and literacy services.

The majority of MARI clients were in active care for 9 months or longer, following their initial appointment.

<table>
<thead>
<tr>
<th>Duration</th>
<th>Percentage</th>
</tr>
</thead>
<tbody>
<tr>
<td>1 Month</td>
<td>2.6%</td>
</tr>
<tr>
<td>3 Months</td>
<td>5.6%</td>
</tr>
<tr>
<td>6 months</td>
<td>9.9%</td>
</tr>
<tr>
<td>9 months</td>
<td>23.1%</td>
</tr>
<tr>
<td>12 months</td>
<td>23.2%</td>
</tr>
<tr>
<td>15 months</td>
<td>18.2%</td>
</tr>
<tr>
<td>18 months</td>
<td>10.9%</td>
</tr>
<tr>
<td>21+ months</td>
<td>6.5%</td>
</tr>
</tbody>
</table>
New MARI Service Started in FY2023

UCCF Expert Consultations: Increasing Access and Serving Clients

The University Center for the Child and Family (UCCF) Expert Consultations were developed to connect clients with professionals more quickly in high-demand areas. These stand-alone, single-session consults offer an initial way for clients to ask pressing questions and to figure out what to focus on next.

Waiting to get an appointment for therapy or testing can be discouraging for a client when they have taken the step to do so. This is not a unique problem to MARI. The National Council of Mental Wellbeing reports wait time to access behavioral services is six weeks, on average. When that relates to specialty services, services for children, and testing (ADHD, Autism, etc.), the average wait time grows.

Addressing the Problem with a New Option
In an effort to offset long wait times for some services and to help answer initial questions, UCCF developed Expert Consultations as a new service in FY23, beginning with child- and family-focused topics. The consultations are generally scheduled more quickly and are stand-alone appointments that are meant to help clients better understand the scope — the size and importance — of the challenges they are seeking care for. Based on the client needs, a MARI clinician may provide specific resources and strategies, including potential treatment recommendations, to help the family prioritize what steps to take next.

Consults can help address, among other concerns:
- Anxiety in Youth
- Autism Spectrum Disorders (ASD)
- ADHD Management and Resources for Children and Adults
- Navigating Adolescence
- Gender Diversity
- Parent-Child Relationships During Early Years
- Parenting and Behavioral Challenges
- When to Seek Testing/Evaluations for Children and Adults
- Other topics as we expand expertise and in response to client needs.

If this sounds like a good fit for you or if you are another clinician who would like to refer a client to our expert consultations, call (734) 615-7853 or visit mari.umich.edu/contact-us to submit a secure online inquiry or referral form.
Client Overview: Who Does MARI Serve?

A large portion of MARI clients are U-M affiliated, particularly when looking at our mental health services. When we polled our clinical staff on the number of current clients who were affiliated with U-M, they reported that 44.2% of their clients were in some way connected to the University, on average.

Connection to University of Michigan
According to MARI Intake data, at least 37% of those seeking services are associated in some way with U-M. Of those, below is how they reported their connection to U-M.

How U-M Affiliation Reflects on MARI Services
And, of those who ultimately became clients and received care at MARI, more than 44% were affiliated with U-M, on average, as reported by the MARI clinical staff. This reflects two primary insights:

1. MARI offers extensive and needed services that help serve our university community and their families.
2. MARI continues to offer services to those outside U-M at about an equal rate, serving both U-M as well as the broader community with a diversity and depth of services not always available through mental health or language and literacy clinics.

It is important to note that MARI maintains a separate health record system from other clinical providers at U-M and Michigan Medicine. For staff, students, faculty and their families, knowing MARI’s system cannot be accessed outside of MARI can provide a certain amount of security.

It’s not that the other records are not secure — it just removes the possibility altogether and creates a boundary that lends further comfort and emotional security for our clients. It is one of the unique values we are able to offer our clients on and off campus.
MARI Client Demographics

Client Ages
More than half of MARI’s clients in FY23 were 17 years and under.

That includes all services offered across all of MARI’s three centers and clinics, such as ASD evaluations, reading interventions, individual therapy, family-based therapy and ADHD testing.

The next most prominent age group was young adults, including those 18-28 years old, representing 22% of our client population.

Client Gender
Most MARI clients identify as female, but we also have a large male-identifying clientele; males are typically underrepresented in mental health services.

<table>
<thead>
<tr>
<th>Gender</th>
<th>Percentage</th>
</tr>
</thead>
<tbody>
<tr>
<td>Female</td>
<td>53%</td>
</tr>
<tr>
<td>Male</td>
<td>42%</td>
</tr>
<tr>
<td>Non-binary</td>
<td>5%</td>
</tr>
<tr>
<td>Transgender</td>
<td>2%</td>
</tr>
<tr>
<td>Genderqueer/Genderfluid</td>
<td>2%</td>
</tr>
<tr>
<td>Agender</td>
<td>1%</td>
</tr>
</tbody>
</table>

*We offer a write-in, not sure, and prefer not to answer option for the gender identity question, all of which had zero responses during FY23, and are not shown on this graphic.
MARI Client Demographics

Race and Ethnicity
This data includes those who were seeking services at MARI as well as those who ultimately became clients. Because we recently changed to an online intake system, we did not have this data consistently reported for clients’ race and ethnicity in previous years.

However, we hope to be able to parse it in coming years to get a better understanding of not just those who are seeking services with MARI, but also to ensure we are offering equitable access to our services.

<table>
<thead>
<tr>
<th>Race or Ethnicity</th>
<th>Percentage</th>
</tr>
</thead>
<tbody>
<tr>
<td>White or Causasian</td>
<td>74%</td>
</tr>
<tr>
<td>Asian, Asian American or Southeast Asian</td>
<td>12%</td>
</tr>
<tr>
<td>Black or African American</td>
<td>9%</td>
</tr>
<tr>
<td>Hispanic and/or Latino</td>
<td>6%</td>
</tr>
<tr>
<td>Middle Eastern or North African</td>
<td>3%</td>
</tr>
<tr>
<td>American Indian or Indigenous</td>
<td>2%</td>
</tr>
<tr>
<td>Prefer to write-in</td>
<td>2%</td>
</tr>
<tr>
<td>Prefer not to answer</td>
<td>2%</td>
</tr>
</tbody>
</table>

MARI is First Mental Health Care for Majority of Clients
We ask those who are seeking mental health services specifically if they have had previous treatment, and if they are currently under the care of another mental or behavioral health practitioner.

The majority report this is their first experience. Some of that may be attributed to the age range of our clients, as this may be the first time a need or recognition of an issue has arisen.

Of those who are not new to mental or behavioral health care, the majority are not currently being seen when they contact MARI.

Have you had mental health care services before?
- 35% Yes, MH care before
- 65% No MH care before

Of those who said yes, most were not currently receiving services.
- 28% Yes, currently being seen
- 72% No, not currently being seen
Each MARI Client has a Story to Tell: How Tim’s Story Has Lead to Change in the Aphasia Community and a $1 Million Endowment

Seeing Tim fighting to find his voice after an aphasia diagnosis, family friend Tyler knew he had to do something to honor him and others who are dealing with aphasia.

If you have not heard of aphasia, you are not alone — many people don’t know about the communication disorder until they or someone they know is affected by it. Aphasia most commonly occurs following a stroke or head injury. It can affect a person’s ability to speak, read, write, or understand language.

While it may not be an immediately recognizable term, that doesn’t mean aphasia is rare or that you haven’t met someone with the disorder. More than 2 million people in the U.S. are estimated to have aphasia, with an additional 180,000 new cases per year. As a communication disorder, it can have far-reaching impact into one’s life, essentially isolating them or undermining independence and self confidence as they navigate the challenges aphasia presents.

This is something the University of Michigan Aphasia Program (UMAP) has long understood. UMAP, started in 1937, was the pioneer of intensive, comprehensive aphasia programs. It was the first in the country to focus on intensive aphasia treatment, and remains a leader in aphasia recovery. Which is how Tim Wadham found UMAP and began intensive, comprehensive speech-language therapy. The impact of aphasia and Tim’s path to recovery through UMAP inspired Tyler Thomas, a close family friend and someone who looked to Tim as a mentor.

Hitting the Ground Running to Raise Awareness and Funding

Tyler, recognizing how profoundly aphasia changed Tim’s life, began to focus on raising awareness and money to help provide access to aphasia treatment for others. He did this by hitting the pavement. And the water. And the trail. When Tyler completed his next IRONMAN Triathlon, a race of physical and mental fortitude, he dedicated it to Tim and Tim’s own endurance course with stroke and aphasia recovery. His initial goal was to raise $10,000 to donate to the UMAP financial assistance program. He surpassed his goal and smashed the IRONMAN — and he didn’t stop. Tim has said UMAP helped him progress in ways he didn’t know were possible, and he recognized that not everyone has access to aphasia resources, which made Tyler’s efforts that much more essential.

Helping Others Now and In the Future

So together, they joined forces and the Tim Wadham and Tyler Thomas Aphasia Fund was established as an endowment in FY2023. The goal is to help those with aphasia attend UMAP who otherwise would not have the financial means to do so. Over the course of several years, the endowment will be brought up to at least $1 million through donations.

Additional funds can be donated to the endowment, as well, which will help fund access to UMAP now and for decades to come.

“When I started reading up and learning about aphasia, it opened up a whole different side of it that not a lot of people actually know. The ability to communicate and to tell people how you feel and what you’re doing — I think we take it for granted.”

-Tyler Thomas, Aphasia Ally
The Next Generation: Training at MARI

One of the core tenets of MARI is our commitment to training the next generation of practitioners. Each year, we welcome a new class of trainees in various roles, at different levels across the Institute. This enables us to contribute professionally to the field by providing hands-on and real world experience to the leaders of tomorrow. Our training programs also help answer the call of the overwhelming and growing need for licensed, qualified mental health and language and literacy clinicians.

How Training Programs Also Benefit Our Clients
As a training organization, that means we are able to offer our clients the best of both worlds. They get access to new, evidence-based therapy approaches and fresh perspectives, while also benefiting from the experience of our senior staff members who are highly involved in mentoring and supervising each trainee’s work. Clinical care is closely reviewed with ongoing tailoring to the client or family in care.

Real-World Education: Training at MARI
MARI offered more than 70 training positions for undergraduate and graduate students, post-docs, and post-MSWs during FY23. Options ranged from multi-year paid positions to shorter-term observations and volunteerships.

Training Opportunities
- APA-accredited Internships in Clinical Psychology
- Post-Doc Fellowships in Clinical Psychology
- Post-MSW Fellowships
- Social Work Internships (U-M School of Social Work grad student placements)
- Speech-Language Pathology Clinical Fellowship
- Speech-Language Pathology Graduate Student Internships
- Undergraduate Internships in Psychology, including ASD, Child and Family and/or Adult track placements
- Psychiatry Residency
- Advanced Practicum and Advanced Practicum Student Supervisors
- Testing Practicum for U-M Students
- Pre-TLLP Practicum for U-M Students
- Autism Spectrum Disorder Undergraduate Internships
- Additional Undergraduate Internships

“I enjoy getting to know the trainees and the unique perspectives they bring to clinical work, including their previous training, lived experiences, and worldview. I also love the innovative and creative ideas they come up with! I am always learning something new.”

-Nina Banozic, LMSW
MARI Senior Clinician, Supervisor and Clinical Intake Coordinator
Training Year: 2022-2023

U of M Practicum Students at MARI

Abby Lucas
Advanced | PC

Neema Prakash
Pre-TLLP | PC

Carly Lasagna
Pre-TLLP | PC

Shayan Asadi
Pre-TLLP | PC

Jenny Cleary
Advanced | UCCF

Cleanthis Michael
Pre-TLLP | UCCF

Jessica Bezek
Pre-TLLP | UCCF

Lara Khalifeh
Pre-TLLP | UCCF

Speech-Language Trainees at the University Center for Language and Literacy (UCLL)

UCLL Clinical Fellow

Bailey Blaisdell
UCLL Clinical Fellow
Speech-Language Pathology

External Psychology Practicum Students at MARI

Sarah Freeman
Eastern Michigan Univ
Advanced | UCCF

Katie Valentine
Michigan State Univ
Advanced | UCCF

Jasmine Channana
Eastern Michigan Univ
Advanced | PC

Allison Denton
Univ of Detroit Mercy
Advanced | PC

Valerie Valledor
Eastern Michigan Univ
Advanced | UCCF

Not pictured:

- **Advanced Practicum:** Tim Wilkins, Psych Clinic
- **Testing Practicum:** Aaron Neal, UCCF; Sujin Lee, UCCF; Anthony Oliveira, UM, UCCF and PC; Kallisse Dent, UM, UCCF and PC; Elena Pokowitz, UM, UCCF and PC; and Audrey Stromberg, UM, UCCF and PC.
- **Practicum:** Kiana Scambray, UM, UCCF and Psych Clinic

MARI Mental Health Post-doctoral Fellows

Valerie Micol
UCCF

K. Leigh Monahan
UCCF

Siena Tugendrajch
UCCF

Dever Carney
Psych Clinic

Allura Malcolm
UCCF Clinic

Not pictured:

- Elle Gallagher
  St. Ambrose University
  UCLL Intern - Fall

- Kendra Peffers
  Michigan State University
  UCLL Intern - Winter/Spring

- Christina Velazquez
  Northwestern University
  UCLL Intern - Spring/Summer
Training Year: 2022-2023

MARI Social Work Interns

Julian Ho  
Psych Clinic

Madeline Chen  
Psych Clinic

Jennifer Dear  
UCCF

Nicole Massoud  
UCCF

Kaila Pulley  
UCCF

MARI Social Work Fellows

Erin McKenna  
UCCF

Nikki Penecale  
UCCF

Irene Binder  
UCCF

Amina Peters  
Psych Clinic

Julia Carpenter  
Psych Clinic

Not Pictured: Florentine Friedrich, Psych Clinic; Michela Agoglia, UCCF; Clare Lauer, UCCF

MARI Mental Health Interns

Alexandra Lawall  
Psych Clinic

Tabitha Mpamira  
Psych Clinic

Julia Rios  
Psych Clinic

Ghina Haidar  
UCCF

Grace Chen  
UCCF

Not Pictured
- UM-ACTS Undergrad Interns: Olivia Vander Hyde; Emma Loewenstein; Claudia Jennings; Joshua Catania; Sarah Salino; Rachel Kraan; Emily Otto; Lailah Fritz; Julia Silverman; Courtney Jones; Evangeline Ye; and Sarah Pomerantz
- Psych Clinic Undergrad Interns: Emma Archer and Lauren Greenspan
- UCCF Undergrad Interns: Keion Harris, Mikalya Freeman, Allison LaMonica, Kaitlyn Zhao; and Katie Good
Thank you for another great year!
Christine S. Asidao, Ph.D., MARI Senior Director

Mental Health Staff
Erin Hunter, Ph.D.
Director of Mental Health Services:
University Center for the Child and Family (UCCF) and Psychological Clinic (PC)

Richard Dopp, M.D.
Medical Director, UCCF and Psych Clinic

Anupama Agrawal, L.M.S.W.
Social Worker; Social Work Training Director, UCCF

Nina Banozic, L.M.S.W.
Social Worker; Clinical Intake Coordinator, UCCF and Psych Clinic

Ellen Barrett-Becker, Ph.D.
Psychologist, UCCF and Psych Clinic

Jonathan Blair, Ph.D.
Psychologist, Psych Clinic and UCCF

Angela Fish, Ph.D.
Supervising Psychologist and Clinical Assistant Professor, UCCF and Psych Clinic

Lily Gershenson, L.M.S.W.
Supervisor; Social Worker, Psych Clinic

Jody Hoffman, Ph.D.
Senior Supervisor; Psychologist, Psych Clinic and UCCF

Geordn Jones, Ph.D.
Psychologist and Supervisor, Psych Clinic

Sarah Jonovich, Ph.D.
Faculty Clinician, Psych Clinic and UCCF

Kristen Kalymon, Ph.D., BCBA-D
UM-ACTS Program Manager and Clinical Psychologist and Behavior Analyst, UCCF

Larry Kowalski, M.S., BCBA
Psychologist, UCCF

Michelle Van Etten Lee, Ph.D.
Psychology Training Director; Psychologist

Jon Ross, L.M.S.W.
Social Worker and Supervisor, Psych Clinic

Ashley Stevens, M.A., BCBA
Behavior Analyst at UM-ACTS, UCCF

Ashley Wright, M.S., LLP
Psychometrist, UCCF and Psych Clinic

Language and Literacy Staff
Carol Persad, Ph.D., A.B.P.P.
Director, University Center for Language and Literacy (UCLL)

Jennifer Corey, M.S., CCC-SLP
Clinic Manager; Speech Language Pathologist, Senior

Margery Block, M.S., CCC-SLP
Speech Language Pathologist, Sr

Bailey Blaisdell, M.A., CCC-SLP
Speech Language Pathologist

Elise Jones, M.A., CCC-SLP
Speech Language Pathologist, Sr

Gordon Krainen, Ph.D., CCC-SLP Speech Language Pathologist, Sr

Keli Licata, M.A., CCC-SLP
Speech Language Pathologist, Sr; Education Coordinator

Elizabeth Mercado, M.A., CCC-SLP
Speech Language Pathologist, Sr

Amanda Sheridan, M.A., CCC-SLP, Speech Language Pathologist, Sr

Dinah Young
Assistant Clinical Services Manager

Central Office Administration Staff
Stephanie Ariganello, M.A., Strategic Initiatives and Business Development Supervisor, Intermediate
Meaghan Fesler, M.S., LLP, Clinic and Operations Manager

Tracey Carpenter, L.L.M.S.W.
Call Center Lead

Cindy Davis, M.Ed.
Patient Services Advocate

Vikki Dudley, B.B.A.
Senior Financial Analyst

Tanisha Ford
Patient Services Associate

Lisa Marie Freeman
Billing Clerk Senior

Charnay Mauldin, M.S.W.
(anticipated degree); Patient Services Associate

Madeline Miller, B.A.
Marketing Communications Outreach Specialist

Mackenzie Narkun, A.A.
Admin Assistant Intermediate and UCLL Admin Support

Remy Rinch, M.S., SHRM-CP
HR Generalist Associate

Erica Runstrom
Patient Services Associate

Edward Verdonk, B.A.
Patient Services Associate

Shani White
Billing Clerk Senior