

**OUTPATIENT MENTAL
HEALTH PROGRAM**
INFORMATIONAL HANDBOOK
APRIL 2017 EDITION



 **SANCTUARY CENTERS**
— OF SANTA BARBARA
Advancing Mental Health Through Treatment and Education

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WELCOME

Welcome to the Arlington Day Treatment Center. We hope the Arlington Center will be a safe place in which you will feel comfortable exploring and working towards your therapeutic goals. Some of you are already familiar with our program as you participated in our services while living in the residential program. Others may have come to us after moving into SCSB's Supported Housing, or from independent living in the community. Each of you is here because you found yourselves in need of compassionate support, and resources, to both navigate present challenges and work toward long term health and stability.

Our primary goal is to ensure you a safe, inviting environment in which to do the personal work that has led you to seek a day treatment program. We hope the experience you have in the Arlington program will allow you to develop and enhance a range of skills and a sense of well-being. We also hope your experience here will contribute to a strengthened sense of self as you walk in the world and enable you to pursue directions that tap your greatest potential.

This booklet is designed to introduce you to the Arlington Day Treatment Center-- who we are, what we offer, who we serve, and some considerations and expectations. Always, ask questions when they arise---everyone here knows what it is like to be new. And, even when no longer new, questions and opinions are welcomed and encouraged.

WHO'S WHO AT THE OUTPATIENT MENTAL HEALTH CENTER?

Outpatient Mental Health Clients – Individuals living independently in the community and attending services at the Outpatient Mental Health Center

They have selected Outpatient Mental Health as an adjunct program to support their general living and personal growth. For some clients, the program also meets requirements for certain federal housing subsidies. In general, out-patient clients might attend as few as one group a week or as many as all group offerings a week. Regardless, each out-patient client is assigned a Case Manager from whom they receive individual therapy and support in navigating various aspects of their lives.

Sanctuary House Residents – Clients living at the Sanctuary House residential treatment program.

House clients attend most Outpatient Mental Health groups as a requirement of the Sanctuary House program. The goal is to further their therapeutic work as well as enhance their socialization and independent living skills. As they progress through the program levels, Outpatient Mental Health continues to be a part of their larger individual program, although they may be attending fewer groups. Each Sanctuary client has a House case manager.

Program Director—Lauren Kopras

A trained professional with extensive clinical and leadership experience. As the Program Director she sets the tone and culture for the Outpatient Mental Health Program. She oversees the program policy and content as well as the staff responsible for delivering the program. Additionally, she supervises the case managers and works closely with Interns/trainees participating in the Outpatient Mental Health Program as well as all part-time group leaders and consultants. She is responsible for all administrative needs of the program. Another component of the Program Director's role is to interface with directors of all other programs at Sanctuary Centers and as such she is a member of the Sanctuary leadership team. The Director's door is always open to clients either just to chat or to resolve any issues concerning you and your participation in the Outpatient Mental Health Program.

Counselors/Case Managers – Trained professionals with at least a Master's degree.

These individuals provide individual counseling and case management. Each outpatient client is assigned to a counselor/case manager. You will meet with your case manager weekly. Often, the counselors/case managers facilitate therapy groups.

Interns/Trainees - These are professionals in training, pursuing a Master's degree or earning hours required by the state for licensure.

Intern/trainees volunteer to co-lead groups and when appropriate, are assigned clients who feel they would benefit from additional individual counseling.

Consulting Therapists – Part-time professional staff who lead groups in their area of expertise.

For instance, we have an art therapist and a creative writing therapist on staff. Also, staff from other Sanctuary programs often will share their expertise leading groups, particularly in the areas of substance use and symptom management.

WHO'S WHO AMONG SANCTUARY LEADERSHIP

WHO ARE IMPORTANT TO THE LIFE AND WELL-BEING OF SANCTUARY HOUSE

President/CEO – Barry R. Schoer

The President/CEO is responsible for the overall operation of the Sanctuary Centers. His leadership sets the tone of the organization and he has responsibility for the financial state of the organization as well as public relations. He reports to a Board of Directors which has ultimate legal and fiduciary responsibility for Sanctuary Centers.

Clinical Director – Lisa B. Moschini

A trained professional with extensive clinical, leadership and training experience. She leads the organization's clinical program. She works closely with all program directors, to guide, support and collaborate, thus ensuring a solid, effective and ever growing clinical environment. Also, as Clinical Director, she establishes and implements sound policies and procedures for the organization. Additionally, she develops and implements Sanctuary's training program, providing supervision for clinicians-in-training and staff development for all Sanctuary Centers clinical staff.

Medical Director (Psychiatrist) – Dr. Eli Katz

The Medical Director attends weekly staff meetings. He is an integral member of clients' treatment teams, thus contributing to treatment plans and ensuring on going medication management. He is on call for emergency and medical concerns.

Property Manager – Don Duncan

The property manager oversees the physical plant and all related needs. He also manages the Arlington and Hollister Apartments which house graduates of Sanctuary House as well as others from the community who would not otherwise be able to afford housing in the community.

House Parent, Cook and Kitchen Counselor

Responsible for menu planning and meals served at the Outpatient Mental Health Center. She is also responsible for the up keep of the building as well as cleaning of the Arlington Apartments.

PROGRAM DESIGN AND OFFERINGS

The SCSB Outpatient Program offers comprehensive group, family, and individual services designed to address each aspect of your personal recovery including: interpersonal, vocational, recreational, social and wellness. Additionally, should you need support around addiction; we work collaboratively with our Co-Occurring Disorders Program (treatment for those suffering from mental health as well addictive issues) to ensure you have access to those services and supports as well.

Our schedule of groups is based on the framework and topics which have proven to be effective in mental health treatment. Our group providers follow specific curriculums to ensure that the group accomplishes what it is designed to, whether it is providing a safe avenue for processing difficult emotions and experiences, teaching core skills for healthy living, or learning about recreational opportunities.

Our current offering includes but is not limited to:

- Dialectical Behavioral Therapy (DBT) groups and counseling
- Skill based groups designed to teach essential life skills in the areas of communication, self-esteem, coping, managing/changing unhealthy patterns of behavior, and strategies for healthy living.
- Process groups designed to more deeply explore and address areas such as grief and loss, relationships, and managing difficult emotions.
- Expressive Therapy based groups that allow participants to process their therapeutic issues through means such as paint, clay, collage, poetry, music, and other modalities aside from talking.
- Therapeutic recreational groups that provide the opportunity for participants to become familiar with the local community, while engaging in physical movement and socializing.
- Vocational Development groups that focus on exploring interests, skills, and abilities in addition to important skills needed for job seeking, interview skills and managing symptoms in both the work and educational setting.

In addition to our groups and individual services, we also offer psychological testing and assessments to help clarify specific issues you may be experiencing.

YOU AND YOUR CASE MANAGER

Your case manager will be your primary connection with the Outpatient Day Treatment program. He/she will be your individual therapist. In the beginning, you will work together to develop treatment goals and based on your specific goals, select the groups that will most benefit you on your personal journey. These treatment goals will also inform the direction of your individual therapy. You and your Case Manager will identify a mutually convenient time for weekly sessions. If either of you for some reason needs to reschedule, the policy is to provide at least 24 hours' notice. Rescheduling by either of you is to be the exception, not the rule. As a case manager he/she also is available to support you in interfacing with family, to sort out issues with collateral providers, and to help you navigate information collection or systems that you need to access.

THE OUTPATIENT MENTAL HEALTH BUILDING

The Outpatient Mental Health building is a magnificently beautiful old Victorian House in downtown Santa Barbara on the corner of Anapamu and De La Vina streets. As an old Victorian house, it provides a homey feel for all of us who spend time in it. The operative word, however, is old, and so it is a bit creaky and needs to be used with enjoyment and also respectful care.

You enter through a white picket fence that encloses a lovely front lawn area. This a great place to take breaks. Downstairs is an entrance/waiting area, a large group room, a dining room, a bathroom off the dining room, and a kitchen. Along with the kitchen is our cook who creates extraordinary lunches every day, and special holiday lunches, too.

Follow the winding staircase to the second floor and you will find additional offices housing the Program Director, Case Managers, and the Property Manager as well as individual therapy rooms.

Please see the attached map so you can begin to familiarize yourself with where the various offices and therapy rooms are located.

FINANCIAL INFORMATION

BILLING PROCEDURE, CANCELLATION AND WITHDRAWAL POLICIES

- 1) **Billing Procedure**
Client meet with either the Outpatient Program Director or their Case Manager and select groups, meals, and counseling sessions that fit their needs.
 - For private pay clients, the elected schedule with charges is sent to finance where they generate a bill which is sent to the client payer for payment.

- 2) **Cancellation Policy**
 - When you provide 24 hour notice to cancel a group or individual session, you will not be charged for that session. The exception to this is when attendance is a clinical issue, then it will be the prerogative of the Out-Patient Program Director, in consultation with the Case Manager.

CONSIDERATIONS AND EXPECTATIONS

AS A MEMBER OF THE OUTPATIENT MENTAL HEALTH COMMUNITY

Common sense, mutual regard, and asking when not sure are core expectations of those of us who are a part of the Outpatient Mental Health community.

Here are a few especially important considerations:

1) Group etiquette:

- Respect for others: group therapy can often touch very tender issues for clients. Listening with respect, being patient and considerate is critical for you and other clients to have a safe environment in which to grow.
- Confidentiality: This is also a critical component of creating and maintaining a safe therapeutic environment. All information shared in a group, including the names of fellow clients, is confidential and must be kept confidential. It is your responsibility to always respect the confidentiality of all clients and information involved in the Outpatient Mental Health Program.
- If for some reason you are unable to attend a group, we greatly appreciate a telephone call to your Case Manager saying you will be absent. Your Case Manager will inform the group leader.

2) Visitors:

- We request that you meet with non-program participants in places other than the Outpatient Day Treatment Center. This request relates to your right to and all clients' rights to total confidentiality. If there is ever a reason for a particular visit to occur, there is a confidentiality agreement that must be signed prior to any the visit. This would be arranged with your case manager and must be approved by the Program Director.

3) Dress and personal hygiene:

- As we function in a group setting, and where there are individuals dealing with many different issues, socially appropriate dress is expected as is attention to personal hygiene. If you have questions about this, or if you are not sure whether something might be appropriate, please discuss it with your Case Manager.

4) Medications:

- Sanctuary House clients who need medication during the day can obtain it from staff during lunch.
- Outpatient clients are expected to be responsible for their own medication needs.
- Non-prescription drugs, alcohol, caffeinated beverages: We request that you please refrain from bringing these to the Outpatient Mental Health Center.

5) Food and Drink:

- Lunch is served from 12:30-1:00pm each day for those having lunch.
- During groups it is requested that only water be brought into the group rooms.

6) Telephones:

- Your case manager will provide you with their office phone number with which to reach him/her.
- Cell phones: We request they be turned off during groups. If you have a break and need to make a call, please do so away from others so as not to intrude on their personal space.

7) Smoking:

- We are a non-smoking facility.
- If you are a smoker and want assistance with quitting please let the Sanctuary House Program Director, Clinical Director or the Co-Occurring Disorder Program Director know. We will provide you with smoking cessation groups, information, and if necessary with aids to alleviate cravings.

INTERFACE WITH OTHER SANCTUARY PROGRAMS

Sanctuary Centers has a number of different programs. In some cases it might be appropriate for an outpatient client to access other available services.

Sanctuary House:

In-patient program. These clients participate in programming at the Outpatient Mental Health Center.

In-Home Supported Services (IHSS):

Clinicians are available to provide support in a clients' home to assist with areas of independent living skills such as medication management, shopping, laundry, budgeting, etc. Recommendations for the needs of such services and the specific areas of need are made by the client's case manager working closely with the SCSB Clinical Director.

Career Development Services:

All Sanctuary House clients have access to Career Development Services and outpatients who are interested can enroll in vocational groups or meet with a Career Development Counselor individually.

Co-Occurring Disordered Program:

This is an outpatient program that works with individuals who suffer from mental illness as well as substance abuse disorder/s. Some of our outpatient clients in the Outpatient Mental Health Program also join the COD program.

THE ROLE OF FAMILIES

IN THE TREATMENT OF OUTPATIENT CLIENTS

Sanctuary Centers' overall philosophy is to know, understand and treat the whole person. Our Outpatient Day Treatment Center incorporates this holistic approach in its program. A client's family and/or family members are considered critical to the primary goal of empowering our client's to develop to their maximum level of functioning. You have experience and knowledge of your family member that is so important to our successful work with him or her. So, to the degree that a client is involved with family members, and to the degree that he/she is comfortable with including family and family members to be part of his/her treatment, we encourage it.

For clients moving from Sanctuary House to independent living who will continue to participate in the Outpatient Mental Health Program, there is a shift in the intensity of relationship between the case manager and the family. This shift is consistent with the treatment direction for all of our out-patient clients. Our population of clients live independently, and so, promoting successful independent living is primary to our treatment. Toward this end, our day program seeks to foster the development of interdependence (as opposed to dependence) between an individual and his family. This is a critical piece of development for all adults, and particularly for adults dealing with mental illness. There are many parts of their lives over which they have not had any, or at best little, control and so challenging the dependence and fostering self-reliance and a sense of self, is a key aspect of our program.

There are two overarching treatment goals for all of our clients. One, is to empower clients to reach their maximum level of functioning including improved/comfortable social interaction; and secondly, is to promote healthy individuation from family. Both of these goals are consistent with enhancing clients' success as they move in the world. The latter goal is particularly significant with this population. Often, clients were developmentally on track and moving toward normal individuation when they experienced their first break and/or serious struggle with mental illness. Families care and their children are in need of care. The individuation process often is arrested, as they become, necessarily at the time, once again dependent on family. Now, as they have moved through levels of treatment and committed themselves to ongoing therapy and general growth, moving forward with the individuation process is critical.

This can be difficult for clients and their families. There is often fear on the part of both parties of letting go of the dependence. It has become familiar- it worked for a time, so to let it go means to shift the nature of the relationship between a client and his/her family. This is normal, healthy developmental movement, but it can feel scary. We work with families to understand that promoting the individuation of their family member does not mean separation from one another, but rather that over time a new, adult to adult relationship emerges, as it does with all children as they grow and lead lives independent of their families.

With this in mind, we welcome the involvement of families. We encourage open communication between Case Managers, clients and family members. Either family members or Case Managers might initiate meetings. Normally, these would include the client so his/her voice always has a place. This promotes a client taking responsibility for choices, decisions, and issues that arise. Case Managers are also available by phone to speak with family members if there are concerns and/or if participating in sessions might be beneficial to the client's progress. If a Case Manager feels family therapy would benefit the client, he/she will recommend it. Family therapy is an adjunct service we offer, or we can refer you to family therapists in the community.

The family's primary source for communication is through the case manager. They leads the client's treatment team, in which family members share a role. If the Case Manager is away, they will designate someone to cover for him/her, or a family may contact the program director. Depending on a client's individual treatment goals, the case manager, client and family will agree on a frame work for how often there will be contact and in what format. The Case Manager has the responsibility to ensure that all aspects of a client's treatment plan lead toward the above mentioned overarching goals.