

Client-Centered • Evidence-Enhanced • Process-Oriented

Description of Treatment Services

Transitions Outpatient Program provides services to treat substance use and/or mental health disorders by promoting holistic recovery and addressing the needs of persons with co-occurring disorders as follows:

Clinical Methodologies:

Transitions Intensive Outpatient Program employs a range of treatment methodologies to achieve client outcomes including, but not limited to: attending didactic sessions; reading materials and completing written assignments to acquire and demonstrate acquisition of knowledge; attending group therapy sessions to share, reflect upon and explore feelings associated with, reasons for, consequences of, feelings about, and alternatives to substance use; and identifying the positive impact remaining substance-free will have on social, recreational, educational and occupational activities. Treatment protocols may include Cognitive-Behavioral Therapy, Motivational Interviewing, Dual Disorders Recovery Counseling, Relapse Prevention Therapy, and peer-centered mutual self-help support (AA, NA, etc.).

Health Maintenance Education Strategies

Transitions Outpatient Program provides client education strategies to avoid inappropriate chemical use and health problems related to chemical use and the necessary changes in lifestyle to regain and maintain health. These include:

- Referral to physician and wellness services
- Learning and practice of mindfulness and meditation techniques
- Dissemination of written material and psycho educational presentations on the causes, progression and negative consequences of continued substance use

Holistic Treatment Approaches, Transition Planning and Community Integration Strategies:

Transitions Outpatient Program helps clients integrate gains made during treatment into daily living and reduce reliance on clinical staff through completion of an individualized client recovery plan addressing, but not limited to, the following areas:

- Client-Centered: Self-determination and self-direction are the
 foundations for recovery as individuals define their own life goals and
 design their unique path(s) towards those goals. Individuals optimize their
 autonomy and independence to the greatest extent possible by leading,
 controlling, and exercising choice over the services and supports that
 assist their recovery and resilience. In so doing, they are empowered and
 provided the resources to make informed decisions, initiate recovery, build
 on their strengths, and gain or regain control over their lives.
- Integrated Services: Recovery encompasses an individual's whole life, including mind, body, spirit, and community. Transitions Outpatient Program coordinates services between clients and community-based providers to promote: self-care practices, family, housing, employment, education, clinical treatment for mental disorders and substance use disorders, services and supports, primary healthcare, dental care, complementary and alternative services, faith, spirituality, creativity, social networks, transportation, and community participation. This program introduces clients to the array of community services and supports available upon termination of services.
- Peer Support: Mutual support and mutual aid groups, including the sharing of experiential knowledge and skills, as well as social learning, play an invaluable role in recovery. Peers encourage and engage other peers and provide each other with a vital sense of belonging, supportive relationships, valued roles, and community. Through helping others and giving back to the community, one helps one's self. Peer-operated supports and services provide important resources to assist people along their journeys of recovery and wellness. Participation in mutual support and mutual aid groups is an expectation of Transitions Outpatient Program.
- Relationship Enhancement: An important factor in the recovery process is the presence and involvement of people who believe in the person's ability to recover; who offer hope, support, and encouragement; and who also suggest strategies and resources for change. Family members, peers, providers, faith groups, community members, and other allies form vital support networks. Through these relationships, people leave unhealthy and/or unfulfilling life roles behind and engage in new roles (e.g., partner, caregiver, friend, student, employee) that lead to a greater sense of belonging, personhood, empowerment, autonomy, social inclusion, and community participation. Transitions Outpatient Program invites clients to include family, friends and other supportive groups in their long-term recovery goals and planning.
- Cultural Sensitivity: Culture and cultural background in all of its diverse representations – including values, traditions, and beliefs – are keys in determining a person's journey and unique pathway to recovery. Transitions Outpatient Program is culturally grounded, attuned, sensitive, congruent, and competent, as well as personalized to meet each individual's unique needs.

Special Services for Clients with Co-Occurring Disorders (COD)

Treatment of clients with co-occurring mental health and substance use disorders will be provided with an integrated, comprehensive perspective toward the client's overall recovery. Treatment protocols for co-occurring disorders include mental health and other support services as well as individual and group counseling for substance abuse. Typically, treatment includes individual and group counseling, psychoeducational presentations regarding symptoms of mental illness, the possibility of co-morbidity, and the need for medication compliance, and referrals to appropriate community services.

Once admitted to treatment, clients receive regular reassessment as reductions in acute symptoms of mental distress and substance abuse may precipitate other changes. Periodic assessment provides measures of client change and enables the provider to adjust service plans as the client progresses through treatment.

Discharge planning is provided for all COD clients prior to termination of services. Clients may be presented with a number of continuing care options. These options may include mutual self-help groups, relapse prevention groups, continued individual counseling, mental health services (especially important for clients who will continue to require medication), as well as intensive case management monitoring and supports. The discharge plan is developed in collaboration with the person with COD, will identify and match their needs with community resources, and provide the supports needed to sustain the progress achieved in outpatient treatment.

Relapse prevention interventions after outpatient treatment will help the client recognize symptoms of psychiatric or substance abuse relapse on her or his own and access a repertoire of symptom management techniques (such as self-monitoring, reporting to a "buddy," and group monitoring). Relapse prevention planning includes the appropriate information to access assessment services rapidly, since the return of psychiatric symptoms can often trigger substance abuse relapse.

Principle Goal: To help enhance the quality of life by offering a safe, supportive environment in which our clients can learn, grow and heal.