



AHS News May 2009

A Look at Suboxone Outpatient Treatment within the AHS System

When confronted with the issues of treating patients with drug dependency and abuse issues, more and more physicians are using Suboxone for their patients. Arbour Counseling Services sites in Allston, Boston, Malden and Rockland all offer Suboxone outpatient treatment programs.

The restrictiveness of methadone maintenance and the uncertainty of using naltrexone for long-term dependence management have made the proven effectiveness of Suboxone and Subutex in both short- and long-term treatment protocols the chosen method of treatment for many clinicians.

Michael Pearlman, MD works out of both the Allston and Malden sites, while John Paul Krueger, MD works with Rockland and Medhat Migeed, MD; Don Barker, MD; and Ashok Bhargava, MD work with the Boston site. The four programs combine to treat nearly 500 patients a week.

The treatment in Allston has been operational for seven months and has over 100 patients. Patients with opiate and heroin addictions come in by referral, have their history taken and are assigned to a counselor. They visit with the staff for Suboxone dosing and a compliance check and have random drug screens for the length of their treatment.

"A lot of the patients have not relapsed," noted April McRae. "It's working out well - you can notice the difference immediately. They are turning their lives around."

Arbour Counseling Services, Boston runs a program with six graduated groups that meet anywhere from weekly to once a month and are run by psychiatrists who are licensed to prescribe Suboxone. Clients also receive individual therapy.

The nine month-old program has a high retention rate of clients who have passed a drug test, seen a clinician and are on a treatment plan.

Suboxone outpatient treatment at Arbour Counseling Services, Malden sees patients with opioid dependence/abuse come in via referral and have a level-of-care evaluation. Once it is determined he or she is a suitable

candidate for the treatment program, the client is assigned to a recovery clinician. Patients may attend SOAP and then step down to Suboxone maintenance and individual or group therapy after they are discharged from SOAP.

Arbour Counseling Services, Rockland began its program in the summer of 2008 and is at capacity with patients currently. The counseling services site receives referrals of opioid dependent individuals from private therapists, primary care physicians, word of mouth and clinics that do not offer Suboxone.

Potential clients complete an Intake assessment, a urine test and have a history taken. If the history of use is not substantial enough to disqualify them from the program, they meet with a clinician and begin with an average daily dose.

Rockland offers five groups addressing addiction recovery, three on Suboxone and two concerning early recovery.

All of the programs will be able to provide individual, group and medication management as part of the personalized treatment programs offered to patients.

If you feel you have an client who would be appropriate for Suboxone outpatient treatment, please contact:

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Arbour Counseling Services, Boston
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Arbour Counseling Services, Malden
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Arbour Counseling Services, Rockland
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Lowell Treatment Center Hosts 10-Year Celebration

Lowell Treatment Center is hosting a celebration in recognition of 10 years of service treating children, adolescents and adults with behavioral health challenges on Monday, June 8, 2009, from 9-11 a.m. at the Solomon Mental Health Center.

Originally founded in 1999 as the Lowell Youth Treatment Center, the facility offers inpatient treatment to children and adolescents, ages 5-17, in need of acute care services. The goal is to provide short-term intensive psychiatric intervention, diagnosis, stabilization and treatment through a multi-disciplinary approach that emphasizes family and community involvement. The Family Stabilization Team (FST) housed at the site also began in 1999.

Lowell Treatment Center added an adolescent partial program in 2001 and the adult PHP in 2005. The adolescent partial serves patients aged 13-18 as a diversion from inpatient treatment or a step-down from a more acute level of care. The adult PHP offers the same services for patients over 18. The FST works with children, adolescents and their families to provide stabilization within the home as well as connect families to a community network of services. Lowell also has a growing Community Support Program (CSP).

Lowell Treatment Center has grown tremendously over the last 10 years. Presently, the facility has well over 8,500 patient days on the inpatient units per year as well as 1,500 patient days in the adolescent PHP and over 3,000 patient days in the adult PHP. The FST serves an average of 65 families per week.

Over the years, there have been many quality improvements at Lowell Treatment Center. The physical environment, clinical programming and performance measures have all improved substantially over the years. As an example, seclusions have been dramatically reduced, and Lowell Treatment Center has seen a sharp 93 percent decline in mechanical restraints. In 2006, the site had 350 mechanical restraints. That number dropped to 17 by 2008, and so far in 2009, the staff has only had one.

Spotlight On: Social Work Interns in the AHS System

The word "intern" can conjure up images of a young person running around making copies and coffee without any real work to sink his or her teeth into.

That stereotype is not in evidence at any of the Arbour Health System (AHS) facilities, particularly when it comes to social work interns. They are located in every hospital and in the counseling centers, and they get directly involved with groups and patients, nearly from the

beginning.

Most of the internship programs are long-standing components of the care patients receive at the sites. Interns come into the system from the Massachusetts School of Professional Psychology, Boston College, Simmons College, Boston University, Lesley College, Cambridge College, Rhode Island College and Bridgewater State, among others.

Social work interns work at the facilities for the entire academic year, observe all facets of the job and contribute in nearly every aspect with the exception of crisis intervention and restraints. The students begin by shadowing full-time employees before moving to varying degrees of independence.

At Arbour Hospital, three social work interns work three days a week on both the inpatient units and in the PHP programs. On the units, they eventually have a small case load, which they share with the case workers. They also help with case management. In the PHP, the interns run groups and work as case managers under the supervision of licensed professionals.

Interns sit in on team meetings at Arbour-Fuller, go through training and orientation, do one-on-one supervision, observe didactic education groups and do aftercare planning and case management. Master's level interns begin to work groups under supervision at the end of their year; the bachelor's level interns are not involved in group therapy.

Social work interns can also be found on inpatient units and in the partials at Arbour-HRI Hospital. There are currently two interns in GAP, and one each in the Evening IOP, the Women's PHP and on the women's inpatient unit. Their duties include observing intakes, serving as an adjunct to individual cases, and master's level interns run groups.

At Westwood Lodge, seven interns work in both the adult and adolescent partial programs. In the adult program, interns start by shadowing employees and get progressively more independent. They help out with case management, collateral contacts, treatment plans and hosting family meetings. Interns also run at least two groups a day.

In the adolescent program, as many as four master's level interns work about 20 hours a week per academic year. They attend groups and run them occasionally; progressing to working more independently as the year continues.

By the end of their time at Westwood Lodge, the interns can carry two cases independently, doing all the work of a clinical coordinator under the supervision of a licensed professional.

AHS Organizations Awarded CBHI Service Contracts

Lowell Treatment Center, Arbour Counseling Services, Allston, and Arbour-Fuller Hospital were all recently awarded contracts for home-based services as part of the Children's Behavioral Health Initiative (CBHI).

The MassHealth managed care entities, including MBHP, NHP, Network Health, and BMC HealthNet, selected providers who responded to an Application for Network Affiliations to participate in regional networks for the provision of in-home behavioral services, thera-

peutic mentoring and in-home therapy.

Arbour Counseling Services, Allston was selected to be a provider in the Boston and Metro regions for the provision of Therapeutic Mentoring and In-Home Therapy, and Lowell Treatment Center will be providing Therapeutic Mentoring and In-Home Therapy services in the Northeast Region.

Arbour-Fuller was selected to participate in the MBHP Network for the Southeast Region. While ACS, Allston and Lowell Treatment Center have experience in the provision of home-based services through their respective Family Stabilization Teams, this will be a new venture for

AHS Patients Say Thank You

From Arbour Hospital:

- "All the staff worked very hard to help the patients. I greatly appreciate what they have done and the care I received."
- "All the staff were perfect to me."

From Arbour-Fuller Hospital:

- "... I learned so many things during my stay at Arbour-Fuller. I met so many caring and kind people - from the staff to the patients. It was a life-changing experience ... The doctors that spoke with me and the staff who worked with me showed real concern, and given my state of mind, that took a lot of doing ... In the following days, in group sessions and individual sessions with members of the staff, I began the slow and steady climb out of my depression. I can't recall the names of the men & women on the staff, but I can still remember the lessons that each of them have taught me. I have experienced something that I will be forever grateful for and will never forget ... On a final note, I would just like to thank everyone on staff for the great work you do. You guys are the greatest. I would not be here today without you."
- "You are all so wonderful ... I would give you all the biggest raises and positive feedback I could."

From Lowell Treatment Center:

- "Thank you all so much for treating and caring for our daughter. Our blessings to each and every one of you."

From Pembroke Hospital:

- "[My MHAs] on West 2, what an unbelievable pair who are extremely compassionate and caring. Kudos to both. My stay could have not been any better. A+"
- "This is an excellent facility and a very motivated unit toward patient care and recovery. I am very highly satisfied with your treatment."
- "[My case manager] forever changed my life in a very positive way. I first met [her] during my intake at Pembroke Hospital in October 2008. We started talking, and I just felt very comfortable talking with her. I trusted her. Ever since then, I've always been able to talk to her when I'm getting treatment in Pembroke. [She] always knows what to say and do for me to help me in the long run. She really knows and understands me. I'm doing a lot better lately because of advice [she] has given me. I really appreciate the time she took to help me get better. She's an awesome person."
- "Thank you for all the staff who helped during recovery ... keep up all the good work."
- "Thanks to all the staff. Words cannot express our heartfelt thanks to all of you for your great care of our Mother."
- "Dear nurses, thank you for taking such good care of me while I was sick, you made me feel at home."
- "Treasure life for it is short and I'll never forget you all. Thank you from the bottom of my heart for being caring, loving and the beautiful people that you are."

Arbour-Fuller Hospital which expands their programs into the community.

In-Home Therapy is a structured, consistent, strengths-based therapeutic relationship between a licensed clinician and the youth and family for the purpose of treating the youth's behavioral health needs, including improving the family's capacity to provide effective support for the youth to promote his/her healthy functioning within the family.

Therapeutic Mentoring Services are provided to youth in any setting where the youth resides such as home, foster homes, school, child care settings, and respite.

It offers structured one-to-one, strengths-based support services between a therapeutic mentor and a youth for the purpose of addressing daily living, social and communication needs. These services help to ensure the youth's success in navigating various social contexts, learning new skills and making functional progress, while the Therapeutic Mentor offers supervision for the interactions and coaches the youth in age-appropriate behaviors, interpersonal communication, conflict resolution, and problem-solving.

The CBHI places the family and child at the center of the service delivery system and new services are being developed statewide to build an integrated system of behavioral health care. Therapeutic Mentoring Services are expected to begin October 1, 2009 while In-Home Therapy Services will begin being offered November 1, 2009.

Music Therapy Makes an Impact at Arbour-HRI

Arbour-HRI Hospital has found success in treating patients with a less conventional avenue of therapy: Music Therapy. Patients' reactions and perceptions of music, their discussions of musical themes, and problem-solving in a musical context are parallel behaviors for responding to similar situations outside the therapy environment.

Jordan Weaver runs the music therapy groups at Arbour-HRI and has found them to help patients translate the thoughts and feelings evoked by music into positive behaviors and ways to deal with problems that occur in everyday life.

Music therapy at Arbour-HRI:

- Serves as an expressive outlet for the clients to communicate thoughts and emotions often increasing the client's range of affect
- Serves as a tool for the clients to practice and learn important coping skills
- Offers a healthy way of dealing with stress
- Appeals to clients who are resistant to other forms of treatment
- Increases self-esteem and a greater sense of self which could lead to healthier decision making

- Increases communication and socialization skills by offering clients a chance to interact with each other in an appropriate manner
- Improve motor skills.

Some of the Music Therapy intervention used at Arbour-HRI includes group singing and music making, song lyric discussion, music-assisted relaxation, music appreciation ("Who wants to be a DJ?") and song-writing.

The group singing is a good way for clients to express themselves, promote healthy social interactions and relieve stress.

Song lyric discussion utilizes client-preferred recorded music and song lyrics to promote emotional and intellectual insight and self-discovery. Clients have an opportunity to identify and discuss emotions. It is most popular on the Dual Diagnosis unit and in the Triangle Program, GAP PHP and Women's PHP.

Music-assisted relaxation, popular on the women's inpatient unit and the women's PHP, can be a way for clients to practice a healthy way to focus and decrease stress. Music appreciation is a time for clients to select familiar songs to listen to and discuss any number of relevant aspects such as song meaning, aesthetics, preference, memories, etc.

Song writing involves the creation of original music, which is done through a structured song writing process or musical improvisation. It helps the clients express thoughts and emotions, gain personal insight, problem-solve and work as a team.