

ARBOUR-FULLER EXPANDS CAPACITY OF ACUTE RESIDENTIAL TREATMENT SERVICES

At Arbour-Fuller Hospital, the Adult Dual Diagnosis Acute Residential Treatment service (DDART), also known by some as Enhanced Acute Treatment Service (EATS), provides substance detoxification, medication management and case management to patient from Massachusetts and Rhode Island. While historically demand has been high for this level of care, the need for additional beds has become a priority as a result of the state's growing opioid epidemic. There has been a focus on increasing the availability of detoxification and other addictions treatment programs, and changes in preauthorization requirements now allow improved access to services.

Planning for the DDART/EATS unit expansion began in the fall of 2015. "Our first priority," says Katlyn Auty, Director of Outpatient Services, "was to make sure Department of Public Health and Bureau of Substance Abuse Service's

"Many patients come to us because of an overdose which is accompanied by passive suicidal ideation. Others come to us because they are struggling with addiction, constantly relapsing, and may also be struggling with mental health issues such as depression or anxiety."

Katlyn Auty, Director of Outpatient Services

requirements were met to enable unit expansion." As well, new staff had to be recruited to complete the team of NPs, nurses, case managers, recovery specialists and other clinicians.

Previously, there were 15 available DDART/EATS beds with both genders

on one unit. The new configuration will have 30 beds—two units of 15 beds each, one dedicated to male patients and the other for female patients. "Now we will be able to separate male and females from a treatment point of view. With the expansion of the unit we can have gender specific groups," says Auty, "for example, doing more trauma-focused work with our female clients."

Members of the multidisciplinary team utilize motivational interviewing to gauge where the patient is at including the stages of change. This assists in the development of each patient's

individual treatment plan.

Dialectical Behavior Therapy (DBT) is used for treatment, and there are psychoeducational groups on topics focusing on other types of addictions (such as gambling), relapse prevention,

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INTELLECTUAL DISABILITIES UNIT ALSO INCREASES CAPACITY

Arbour-Fuller Hospital's Maureen Diana, RN, is the Clinical Program Director of the Intellectual Disabilities Unit and has been very involved with preparing for the unit's expansion.

The intellectual disabilities program provides care for adults with permanent developmental disability who are experiencing an acute psychotic episode. The program originated in 1989 as a 4-bed unit that grew to 12 beds over the following 20 years. In December of 2015, the program moved to a larger unit and expanded to 20 beds.

One of the expected changes with the increase of patients is a greater variety of behaviors, some requiring a higher staff-to-patient ratio such as patients who are aggressive or exhibit self-injurious

"The need is certainly there. This is the only unit in Massachusetts that does what we do."

*Maureen Diana, RN
Clinical Program Director*

behavior. New staff were added because of the additional bed capacity and in anticipation of increased needs in patient treatment, monitoring and administration of behavioral plans.

A large part of the intellectual disabilities treatment program involves many staffed group activities. Groups run all day from 9:00 a.m. to 8:30 p.m. with a quiet hour from 3:00 p.m. to 4:00 p.m. during the shift change.

Diana says, "We start with 'check-ins' at the beginning of each shift. There is a community meeting where we review the schedule, do some exercises and open it up to the patients to discuss any communication issues. Then we have groups dealing with coping skills,

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examining triggers and gender-specific issues. The unit can make adjustments day-to-day if there is a need for specialized programming based on those who are currently participating.

The program also works with outside organizations like Narcotics Anonymous and Alcoholics Anonymous. Volunteers who come in to run groups on the unit are individuals in recovery themselves. They provide coaching and leadership to patients in the groups.

“We are enhancing our curriculum to meet the needs of the patient population. From a clinical point of view, it is a change for us as a result of the unit growth and changed configuration.”

Katlyn Auty

As Auty sums up, “The most important result is that additional beds allow patients to get into treatment more quickly.” She explains, “When you are working with the dually diagnosed, there is often a short window when they want to enter into a voluntary program like ours, because in that time a degree of motivation and acceptance exists. You want to be able to capitalize on that in a timely fashion.”

processing, emotion management and social skills so they can work on different ways to deal with anger, hopelessness or depression.

“There are activity-based groups like art therapy, music therapy and sensory group. We also have groups called Medication Education and A Healthy Lifestyle, which include discussions on basics such as drinking plenty of water, eating protein, wearing a seatbelt, brushing teeth and washing hands. We make these discussions interesting and fun with games and prizes because everybody loves prizes!”

In order to monitor patients, the staff makes use of detailed grids. “A new grid is created daily to monitor and document each patient’s behaviors throughout the day—issues like aggression, medication non-compliance—whatever their external caregivers or internal clinicians want to address while the patient is on the unit. Also checked hourly on the grid are any medication changes and how the patient is responding to their medications.”

The other component of patient treatment is the highly individualized behavioral plans created for those who need to work on something specific. Small rewards are

given for hard work on the patient’s part in making progress on their issues. This type of plan is tailored to the individual so staff may provide a special or meaningful prize for a patient who meets a behavioral goal.

“I spent Sunday making Spanish food for one of our Spanish guests.” Diana says, “The agreement was, if he achieved his goals, I would bring in Spanish food.”

“You either understand it and you get it or you don’t. The people I work with get it. They have been here for years and years and they still give 100% every day.”

Maureen Diana, RN

“Every one of our staff goes out of their way to reinforce patients who have made progress in the behavioral plan.” Diana says it makes a huge difference. “You connect with the patients and they trust you. When you get through to someone, it’s such a wonderful, rewarding thing.”

With the dedicated staff, Diana feels that the Intellectual Disabilities Unit is ready for 2016.

PATIENT TESTIMONIALS

Excerpts from letters from former Arbour Health System patients.

“This program saved my life. I felt so respected here. The staff really cares.”

Adult PHP Patient
Westwood Lodge

“I just want to write you this letter for encouragement and thanks. I’m truly grateful that even though you are busy working, you always took the time to help so I could move forward in my recovery. Besides my faith and spiritual beliefs, I

don’t think I would have made it this far without all the hard work you did for me when you could have easily brushed me off. So to be brief, and to the point, thank you, and I thank (staff member) as well and all the other staff that helped me in my journey and just want to say I am truly grateful and keep up the good work. You all made a great and positive difference in my life!”

Patient
Arbour-Fuller Hospital

“I hope you’ll realize this is my small attempt to thank you for your compassion, your empathy, your strength, patience, your care and yes,

even those times you get me to step out of a box I’ve gotten used to staying in. As paths cross we take away small nuggets of wisdom, knowledge and peace from each other. Please know I’m so grateful that our paths have crossed at this time and place.”

Adult PHP Patient
ACS, Worcester

“(LTC staff member) was extremely personable and took every step needed for my recovery. I have improved tremendously and am super grateful for all the support!”

Adult PHP Patient
Lowell Treatment Center