



Mental Health Matters

THE GUIDANCE CENTER

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Responding to Community Need: Keith Rickard, MS, LCP

Over the past few years, The Guidance Center has been very intentional about its efforts to find new ways to meet the mental health and substance abuse counseling needs of the community.

Improving the health and safety of the community is the sole reason for our existence. Furthermore, it has been the intentional effort of everyone working at TGC to offer high quality, cost effective, and outcome-based care.

We want to prove that what we do makes a difference to people, and we want those who pay for those services to be assured of service cost effectiveness.

We also see ourselves as part of the economic infrastructure of the community. We are as much a consumer and business partner as we are a health care provider.

Another of our intentional efforts in recent months is to collaborate with other stakeholders, finding new ways to deliver services and coordinate with other providers.

We value our relationships with SRS, schools, court services, law enforcement, community corrections, private providers, and others. We are working with the same citizens and we need to coordinate our efforts to ensure smooth functioning between systems.

In this newsletter we are sharing what some of our new evidence-based programs look like. We are excited to be able to participate with our community in providing care that is state-of-the-art.

I encourage you to take a look at some of the new and exciting things taking place at your community mental health center.

Multisystemic Therapy Reintroduced

The Guidance Center has reintroduced the Multisystemic Therapy (MST) program in Atchison and Leavenworth counties. MST is an evidence-based treatment model designed to treat chronic, violent, or substance-abusing juvenile offenders who are at high risk for out-of-home placement. The program is made possible with grant funding through the Juvenile Justice Authority with oversight by the local Juvenile Corrections Advisory Board.

The goal of MST is to provide a cost-effective, family-based treatment program that results in positive outcomes for adolescents who demonstrate serious antisocial behavior. MST is an intensive program which empowers parents with the skills and resources needed to independently address the difficulties they face. Additionally, the program empowers youth to cope effec-

tively with family, peer, neighborhood, and school problems.

Adolescents participating in the program are typically 12 to 17 years old and are at risk for placement outside of the home, including residential treatment facilities, psychiatric inpatient treatment, or incarceration.

MST has demonstrated statistically significant outcomes, including improved family relationships and functioning, increased school attendance, and decreased criminal activity and incarceration in studies with violent and chronic juvenile offenders. The studies with violent and chronic juvenile offenders showed that MST reduced long-term rates of subsequent arrests by 25% - 70%.

Referrals are accepted from Atchison and Leavenworth County Community Corrections.

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KEITH RICKARD, MS, LCP
EXECUTIVE DIRECTOR

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DAVID BARNUM, PH.D.
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Doing What Works: Implementing Evidence-Based Practices at TGC

David Barnum, Ph.D., Clinical Director

In 1936, the first major study attempting to compare the effectiveness of different psychotherapy methods was published. After reviewing the available research, the author concluded, “that all methods of therapy when competently used are equally successful.” This conclusion sparked a debate that continues today in mental health treatment: What treatment or treatments are effective for which conditions and which people?

Over 300 distinct approaches to psychotherapy are named in professional journals. Moreover, behavioral health treatment in the 21st century, including alcohol and drug treatment, includes an array of services in addition to psychotherapy such as case management, psychosocial programs, medication, attendant care, and parent support. There are so many treatment options, no wonder people have had a hard time knowing what treatment they might need or should request!

The difficulty of navigating the volume of options isn't just limited to consumers. As each approach or method makes its claims for being “The Treatment,” providers easily become overwhelmed with the number of approaches they need to master to do good work with their clients.

Fortunately, a new emphasis emerged and gained momentum during the 1980's and 1990's – evidence based treatments. The demand for evidence demonstrating treatment effectiveness has allowed both consumers and providers to start making sense of the available options. It also allows both consumers and providers to make active, informed choices about their care.

This shift in focus – from treatment that is theoretically consistent to treatment that is demonstrated to be effective in the real world – has provided an essential guide to mental health providers and consumers.

We judge the appropriateness of a treatment by two criteria: is it ethical, and does it work?

Over the course of the past 15 years, The Guidance Center has been utilizing client outcome data to develop and provide outcome-driven treatment. We have regularly collected data to let us know whether services provided to our children with severe emotional disturbances and our adults with severe mental illness are helping them function better in their world. We have

ensured that the services we provide are consistent with state-of-the-art treatment of those conditions in these particular populations. We have recruited professional trainers to keep our clinical staff up-to-date on the best treatments available, and we are constantly improving our treatment models, integrating new information about making treatment effective while implementing curriculum and methods based in clinical research.

In the past two years, we have directed our attention to making our traditional outpatient therapy services outcome-responsive. We are committed to the perspective that the feedback we get from our consumers is our best gauge for how well services are working.

The research is clear that we need sensitive measures to identify when treatment is working and what needs to change when it is not. Consequently, using two simple, quick forms, we collect feedback from each client about how he or she is functioning in the world and how that particular session has gone. This information is tracked over time for each client and allows us to hone the therapeutic approach of each clinician for each client.

This is truly outcome-driven therapy. If the consumer is reporting gains, a generally positive feeling about the service, and the service meets ethical/state of the art standards, the service continues. If any of these components is off, the clinician receives feedback and, when needed, assistance in adjusting the therapeutic approach to improve effectiveness. This feedback comes session-by-session so adjustments can be considered and made in a timely fashion and outcomes can be improved. In 2005-2006, we implemented this system with adult services; during 2007, we will incorporate the child version of these tools to assess and improve our services to our youngest clients and their families.

Research based curriculum, active gathering of outcome data, and adaptation of treatment approaches based on individual feedback are the hallmarks of The Guidance Center's commitment to empirically-based, outcome-driven treatment. We look forward to taking our next steps in state of the art behavioral health care for our communities in Atchison, Jefferson, and Leavenworth counties.

“My Job Means the World to Me:” A Supported Employment Success Story

In July 2006, The Guidance Center implemented an Evidence Based Practice Supported Employment Program—an enhancement of services available to seriously mentally ill adult clients for over 10 years.

For two years, the Center will receive implementation assistance and oversight from KU’s School of Social Welfare, ensuring fidelity to the EBP treatment model.

Six principles guide the EBP Supported Employment Program:

- Client Choice
- Integration of supported employment with mental health treatment
- Rapid job search
- Client preference
- Follow-along supports are provided to both the consumer and employer on a time unlimited basis
- Competitive employment versus sheltered workshop type of employment

David Carl is just one TGC consumer who has found success in this program.

“I have been going to the Guidance Center for many years,” states Mr. Carl. In addition to experiencing chronic, serious mental illness, Mr. Carl cites a lack of education and legal problems from securing employment.

Through case management and in-home therapy services from the Guidance Center, Mr. Carl addressed his legal issues, secured safe housing for his family, learned to

budget successfully, and learned effective use of prescribed medications.

However, Mr. Carl **“wanted to be successful and do more than survive.”**

Following advice from other Guidance Center providers, Mr. Carl began participating in the EBP Supported Employment program with specialist Elaine Atkins.

“Elaine has helped me with my applications and talking to my bosses when I needed someone on my side. She has helped me get my teeth fixed, get clothes and even a haircut and get a phone to be ready for a job. Elaine is always ready to meet me at my job or at home. Without her help, I probably couldn’t keep a job.”

With the support of the program, Mr. Carl has successfully maintained employment as an inserter with the Leavenworth Times for six months. States Mr. Carl, **“My job means the world to me.”**

In recognition of his accomplishments, Mr. Carl’s photo will be framed and will hang on the “Wall of Fame” in the Supported Employment office.



2007 Clinical Workshop Schedule

For the third year, the Guidance Center is offering its educational programming to interested members of our community. These workshops may be useful to local clinicians, health care providers, educators, and other individuals interested in gaining knowledge of the subject areas.

A fee is charged and continuing education credits provided for BSRB-licensed clinicians, nurses, and physicians. Programs will be presented at the Kaaz Campus in Leavenworth, and are typically scheduled for 9am-4pm, with registration at 8:30am.

The following is the 2007 schedule, subject to change depending on presenters’ availability:

March 7: Emotion-Focused Therapy, Adam Buhman-Wiggs, Ph.D.

June 6: Ethics in Community Mental Health, Ron Denney

July 18: Solution-Focused Brief Therapy, Jim Krieder

July 19-20: Youth Case Management Institute, Dave Barnum, Ph.D. and other TGC clinical staff.

August 1: Treatment of Adolescents who Self-Injure, Matthew Selekman

September 13-14: Adult Case Management Institute, Dave Barnum, Ph.D. and other TGC clinical staff

October 3: Bridges Out of Poverty: Strategies for Professionals and Communities, Terie Smith

December 5: Differential Diagnosis & Family Therapy with Complex Cases, Dave Barnum, Ph.D.

Additional information is available by contacting Anne Werring at (913) 758-9425.

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Leavenworth, KS.
66048

Promoting healthy communities.

THE GUIDANCE CENTER

500 Limit Street
Leavenworth, KS 66048

Phone: (913) 682-5118
Fax: (913) 682-4664

Anne Werring
Corporate Compliance &
Critical Projects Director

E-mail: awerring@theguidance-ctr.org
www.theguidance-ctr.org

The Guidance Center, Inc., founded in 1937, provides mental health services to the citizens of Atchison, Jefferson, and Leavenworth Counties. Originating in Atchison as the Child Guidance Clinic, the center joined forces with Leavenworth County in 1964 and became a two-county agency. A clinic in Jefferson County was added in 1975.

Today the administrative activities, as well as community support and community based services, are based in Leavenworth. The Guidance Center has outpatient clinics in the cities of Atchison, Leavenworth, and Oskaloosa. Throughout the Center's 70 years of providing comprehensive mental health services in northeast Kansas, more than 30,000 individuals and families have been supported in their journeys toward a healthier and more satisfying life.

OUR MISSION:

The Guidance Center promotes healthy communities by delivering comprehensive behavioral health services to individuals, families, and communities of Atchison, Jefferson, and Leavenworth Counties.