

UnityPoint Health Meriter Child and Adolescent Program
Intensive Outpatient Services
Annual Review
2022

The UnityPoint Health – Meriter (UPH-Meriter) Child and Adolescent Program hospital-based day treatment program (Partial Hospitalization Program) completed a third full year of services at the end of 2022.

This program, previously referred to as the Intensive Outpatient Services (IOS) program, is certified under Chapter 40 of the Wisconsin Department of Human Services (DHS) guidelines. This report summarizes the IOS model of care, data, and outcomes for calendar year 2022. This program is now referred to the UnityPoint Health – Meriter Partial Hospitalization Program (PHP) and is identified under DHS as a hospital-based outpatient program. Throughout 2022, preparatory work was done on the program development and staff training in anticipation of application to DHS in early 2023 for a new Intensive Outpatient Program (IOP), referred to by DHS as a community-based outpatient program. These two programs (PHP and IOP) collectively make up the overall intermediate level of care provided at UPH – Meriter for child and adolescent outpatient services (IOS).

The PHP program continues to be designed around evidenced-based psychotherapy intervention with a special focus on wellness and family-based approaches that continue to go beyond a partial hospitalization program. Research continues to support non-pharmacological interventions, including wellness and family-based interventions for the promotion of mental health in adolescents. The wellness interventions included in the program are strongly supported by high quality research. The program is structured around a design that is referred to as the HEALTH model developed at UPH-Meriter. This model is based on the following:

- **Health and Wellness:** Treatment services are focused overall on health and wellness, including exercise, nutrition, sleep and building community.
- **Evidence Based Treatment:** Participants are provided individual and group psychotherapy, focusing on core issues common among youth and families. Therapy and medication management are based on evidence-based practice.
- **Attention to Family:** Caregivers and family are included in all aspects of treatment, acknowledging healing throughout the entire family system.
- **Live in the Moment:** Understanding and applying the importance of mindfulness and medication as a means of healing symptoms of mental health concerns.
- **Teach Life Skills:** Therapy, wellness and interventions offered are intended to create a foundation for emotional and behavioral health for a lifetime.
- **Help the Community:** Part of the IOS mission is to serve the individual as part of the community. The program strives to build partnerships with community organizations, schools, and outpatient providers for optimal transition of care.

Fundamental tenants/goals of the program include:

- The knowledge that the most successful outcomes come from a wholistic approach to care and must include assessment of family and community dynamics as well assessment of history of trauma, developmental factors, and current coping skills.

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- Ongoing safety of each participant is of paramount concern and is assessed every day by a qualified mental health professional or psychiatrist and through the development of an individualized safety plan.
- The belief that multidisciplinary involvement is required to ensure successful progression to discharge from the program. In addition to the participant and the interdisciplinary team at IOS, this also includes the participants family/caregivers, representatives from their school, their community therapist and psychiatrist, a case manager if available, and any other support individual/supervise identified in their treatment plan.
- It is important for the participant's long-term success to work towards community integration/re-integration as part of the program. This is done by developing a minimum of six individual goals related to the HEALTH model that encapsulate the following:
 - Health and Wellness
 - Evidence-based treatment
 - Attention to Family
 - Living in the Moment
 - Teaching of Life Skills
 - Helping the Community

Referrals, Admissions and Treatment

Referrals to the program come from a variety of community sources, including providers and programs both within and outside of Dane County. Due to the duration of the program, the surrounding school systems are also actively included in care plan development and discharge planning.

As the distance from the pandemic expanded in 2022, with the easing of social distancing restrictions, programming capacity eventually returned to sixteen chairs for this program. Participants are divided up into two concurrent cohorts – a “tween” cohort for 13 – 14-year-olds and a “teen” cohort for 15 – 18-year-olds. Unfortunately, program volumes were impacted by the struggles in the market to recruit and retain Behavioral Health Therapists (BHT). The first quarter of the year reflected a 43% vacancy rate, although by the end of the year that had decreased to 18%.

The Clinical Coordinator and program Manager continued to assess and improve the program throughout 2022 with the assistance of two consults trained in trauma-informed care to education staff and improve documentation standards to reflect trauma intervention. Is focus improved services to the current PHP program but also prepared staff for the IOP program anticipated to start in 2023. Additionally, the Clinical Coordinator expanded the clinical supervision for the BHT staff to exceed mandated supervisory requirements.

The PHP program continues to be designed on an eight-week cycle, incorporating evidence-based practice that includes individual and group therapy, dialectical Behavior Therapy (DBT), and medication review/management in conjunction with the participants Primary Care Provider and/or community psychiatrist.

The Treatment Milieu

As with the UPH-Meriter inpatient Child and Adolescent inpatient unit, the treatment milieu is considered a therapeutic tool in the overall care of the participants. Through the milieu, the participants

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learn acceptable social behaviors and develop therapeutic relationships with both peers and staff. Most of the participants' day is spent in a group setting that requires the development of mood and behavior modulation, and the development of appropriate personal/interpersonal boundaries. The group setting also provides the opportunity to develop skills to give and accept feedback in a positive manner.

Emergency Safety Measures

The IOS program continues to be structured to prevent and de-escalate behaviors that might contribute to an unsafe environment while ensuring the rights and dignity of all the participants and staff. Participant and staff safety continues to be of paramount importance in the program and staff continued to be training in Crisis Prevention Institute (CPI) techniques for de-escalation. Due to a UnityPoint Health all-system decision, by the end of 2022, CPI was replaced with Management of Aggressive Behavior (MOAB) techniques and staff will be trained in these new skills in 2023.

The program does not rely on seclusion as a means of managing behavior and physical holds are only used if a situation presents a safety risk to a participant and/or their peers. No incidents of physical holds occurred in this program in 2022.

Because participants may have active suicidal ideation, safety plans are developed and reviewed frequently. Participants are screened daily for changes to mood and level of depression. At no time is a participant isolated or alone during the daily course of care.

Outcome Measures and Evaluation of Performance

	Q1 '22	Q2 '22	Q3 '22	Q4 '22
BHT Vacancy	43%	34%	18%	18%
Participant Days Pending Admission*	not tracked	545	230	434
Participation Days	1447	1218	879	1379
Budgeted Days	2070	1763	1434	2116

*Days pending admission include number of participants who have been referred and are pending admission review and are waiting for an opening in the program.

A more concentrated focus on diversity, equity, and inclusion was initiated in 2022.

- The baseline of people of color in our outpatient workforce in 2022 was 13%.
- The baseline of people of color in our participants in 2022 was:
 - Q1: 11.1%
 - Q2: 15%
 - Q3: 16.3%
 - Q4: 10.3%

Comparative data:

Population	White	People of Color	Source
Madison	72%	28%	www.census.gov
Dane County	84%	16%	www.census.gov (2020)
State of Wisconsin	86%	14%	www.census.gov (2020)

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Caregiver Support Group Creation:

In October of 2022 the DBT Parent Skills Support group was launched. This group is open to parents of the PHP participants and reinforces Dialectical Behavioral Therapy (DBT) training that is provided during the participant participation in the program. The intention is to assist caregivers in encouraging healthy development in adolescents, parenting from a place of mindfulness and improving the ability to manage difficult emotions.

Summary and Next Steps

The third full year of services in this program included more in-depth program development and ongoing recruitment and retention efforts with a focus on diversity.

2022 Goal Status:

- Parent support/education group – learnings from the first two years of programming have identified that caregivers will be better equipped to support their children provided they better understand the factors contributing to and persisting with their children. As a result, the support group idea has been modified to include elements of education at each meeting. [Completed August 2022](#)
- Expansion of services to include Community-based program (4-hr/day). Delay in program expansion is primarily related to Covid restrictions that limit additional participants in the program space. [Carry over to 2023.](#)
- Staff education on trauma informed care. As most participants have some history of trauma, staff education related to trauma informed care will be necessary on an on-going basis. [Completed.](#)

This report was respectfully submitted by: Monica Case, Director of Behavioral Health Services
UnityPoint Health - Meriter