



# Resnick Neuropsychiatric Hospital

## **GENERAL ADOLESCENT PARTIAL EATING DISORDER PARTIAL**

### **WELCOME**

The Adolescent Partial Hospital Program and the Eating Disorder Partial Hospital Program are part of the continuum of care provided by the Adolescent Service within the Resnick Neuropsychiatric Hospital at UCLA. The APHP and the EDPHP offer a time limited, treatment program of therapeutically intensive clinical service and group interventions. For adolescent patients, an academic program is provided on site through the Berenece Carlson Hospital School of LAUSD.

Patient and family education is an important part of the Adolescent Partial Hospital Program and the Eating Disorder Partial Hospital Program. While participating in partial hospital, the patient and the family will receive education regarding diagnosis, treatment, medication, communication skills and discharge recommendations. Each staff member in the partial hospital program may participate in patient/family education in various ways.

Patients coming from the inpatient service will continue working with the physicians, clinicians and social workers assigned to them on inpatient. If a patient does not have a pre-existing relationship with the NPH team, a case coordinator and social worker will be assigned to them. In some cases patients continue therapy with an outside therapist while in program. With every patient, an effort will be made to communicate with the outside therapist and facilitate a smooth transition back into private therapy.

Patients in this program include adolescents transferring from the inpatient programs on 2South and 2West, as well as young adults who have participated in the eating disorder program on 2West. The goal for these patients is to provide a transition back into the community and a lower intensity of treatment and support. In addition, general adolescent patients may be admitted directly from outpatient treatment in order to provide evaluation and crisis stabilization in the hope of avoiding inpatient hospitalization.

For all patients, evaluation, treatment, relapse prevention and discharge planning are oriented to facilitating patient treatment goals in the community setting.

## **MEMBERS OF THE TEAM**

Clinical services in the APHP are provided by a multidisciplinary team. While all staff participate in varying ways in milieu and program activities, each member also carries certain specific responsibilities.

**Medical Director**—responsible for overall management and treatment of patients.

**Nurse Practitioner**—assists Medical Director in managing medication and program related medical issues for patients in the partial hospital who are not being case managed by an MD. Additionally, the nurse practitioner does case management for patients directly admitted to the partial hospital.

**Program Director (General Adolescent Program)**—responsible for integrating overall philosophy with treatment goals, as well as seeing that the program complies with hospital budgetary and quality management requirements.

**Administrative Program Director (Eating Disorder Program)**—responsible for overseeing resource allocation to ensure the availability of qualified staff, establishing mechanisms for budgetary management and quality management and ensuring the maintenance of the program structure and its integration with the inpatient program.

**Assistant Program Director (Eating Disorder Program)**—in collaboration with the Program Director, oversees virtually all aspects of the EDPHP including readmission assessment, psychiatric evaluation, treatment planning, disposition planning, regular assessment of patient progress. In collaboration with the EDPHP team, the Assistant Program Director ensures the maintenance of the program structure and helps provide a smooth transition from the inpatient program to the partial hospital program.

**Team Leader**—responsible for coordinating various phases of treatment and facilitating communication with staff. In addition, the team leader is involved in the clinical care of patients.

**Nurse**—responsible for helping to plan patient care, for communicating patient's needs to doctors and team members and for providing education and information regarding medication and treatment.

**Dietition (primarily Eating Disorder Program)**--responsible for ensuring nutrition needs are met and providing education to patient and family regarding dietary needs.

**Child Care Staff**--responsible for supervising patients in daily activities, for incorporating patient care goals into activities and for reporting patient progress to the rest of staff.

**Social Worker**—responsible for group and family therapy.

**Recreation Therapist**—responsible for social skill training, sport/leisure training, community activities and leisure planning.

**Occupational Therapist**—responsible for task performance, problem solving and hobby skills.

## **PREPARING FOR HOSPITALIZATION**

Patients come to APHP for many different reasons. All patients, however, are admitted on a voluntary basis. The active participation of patients and their families is a valuable component of treatment.

### **Admission Day**

On or prior to the day of admission the patient and/or parents will meet partial hospital staff and be oriented to the program.

### **What to Bring**

Each patient must wear or bring athletic shoes. Patients are encouraged to bring bathing suits in warm weather.

### **What not to Bring**

Cameras, beepers, sharps or valuables should not be brought into program.

### **Accommodations**

The program has a large all-purpose room for lunch, group activities and games. A small interview room is used for individual and family meetings and as a quiet room for patients needing to rest or to take a time out. In addition, the program shares space in the classrooms and rehabilitation area with inpatient adolescent groups.

## **APHP PROGRAMS**

### **Description of Activities**

Groups and activities in the General Adolescent and Eating Disorder Partial are described below. The General Adolescent Partial Program is held Monday through Friday from 9 am to 3:30 pm. The Eating Disorder Partial operates seven days a week, 8 am to 6 pm Monday through Friday and 8:30 am to 6 pm Saturday, Sunday and holidays.

### 3 Hours Daily School

Adolescents attend school in their assigned classroom.

### Recreation Therapy

Recreation Therapy includes community outings, therapeutic games and/or physical activities. These groups provide information for evaluation of social/recreational needs.

### Occupational Therapy

This group evaluates task performance and provides opportunities for learning skills and problem solving. Activities include craft workshop and cooking group.

### Group Therapy

Group Therapy focuses on improving patients' ability to verbalize thoughts and feelings, and to increase connections between feelings and behaviors.

### 60 Minutes Daily Lunch

Lunch is provided for all APHP patients. (Patients may also choose to bring food from home; a refrigerator is available for cold storage.) After lunch patients are free to socialize, read, play cards or games, play ping-pong or simply relax in the group room. Staff are present at this time to provide maximum opportunities for interaction and ongoing evaluation.

### Daily Goal Setting/Milieu/Transition Group

This group provides an opportunity to formulate and review realistic and appropriate daily goals, discuss program-related issues and conflicts with peers and staff and check in with staff to problem solve issues before leaving for the day.

#### Eating Disorder Group Therapy

This group focuses on the relationship between issues of daily living and eating disorders. Patients are encouraged to examine the nature of his/her eating disorder and the way that the disorder is used to manage significant life issues like relationships, achievement, feelings of dependency and self control.

#### Young Adult Eating Disorder Group Therapy

Deals with same issues as Eating Disorder Group Therapy but focuses on the issues that are specific to the developmental tasks of young adulthood.

#### Adult Cognitive Group

This group focuses on strategies for dealing with and modifying negative belief systems and self talk.

#### Adult Occupational Counseling

This group focuses on discussion of the occupational choice process and on developing concrete strategies and plans with regard to work and/or school.

#### Relaxation Group

This group takes place as needed and utilizes a variety of techniques including gentle stretching, awareness of breathing and listening to quiet music to teach patients how to effectively alleviate symptoms of stress.

#### Cooking Group

In this activity patients are taught the fundamentals of planning, shopping for, and preparing nutritionally balanced meals. For the Eating Disorder patient cooking provides a setting where patients are assisted to decrease anxieties associated with nutritional food management. For the general adolescent emphasis is on task performance and skill development.

#### Health Group

This group is held as needed for all adolescent and adult patients. It is a didactic group addressing medications, general health issues and utilization of treatment resources.

#### Relapse Prevention Group

These groups take place several times a week . A variety of techniques are employed to help Eating Disorder patients manage feelings and develop strategies to deal with problematic eating disorder behaviors.

## **RULES AND POLICIES**

### **Daily Routine**

Patients in the APHP are expected to participate in all program activities. Individual therapy may be arranged during program hours by the patients' in house therapist. Where appropriate, family therapy is provided in the program. Patients may also request individual time with APHP staff as needed.

### **Medication**

Any medication that is taken at any time during the program day must be brought in from home in the original container. This includes all prescription or over-the-counter drugs. Medications should be turned in to program staff upon arrival and will be administered by licensed nursing staff based on an order from their physician. Inhalers may be kept by the patient when so ordered by their physician.

### **Attendance and Timeliness**

Patients are expected to attend the program daily. Tardiness and absences will be discussed with patients and family. If a patient is unable to attend the patient or their parents must call the program office by 8 am to notify staff.

### **Transportation Policy**

Adolescents must be transported by a family member or adult friend of the family, designated ahead of time in writing. Patients may not leave the program with other patients or the parents of other patients. When arranged ahead of time in writing, adolescents may drive themselves to and from program or may take public transportation to or from program. Adolescents must be accompanied to program by an adult. Young adults arrange their own transportation.

### **Dress Code**

In general, clothing should be appropriate to weather and setting. Clothing with controversial messages, slogans or pictures involving sex, drugs, alcohol, tobacco etc. is not acceptable. Very revealing clothing is not permitted. For girls, this includes short shorts, very short or tight skirts, low pants or tops with spaghetti straps that leave bra straps showing. Torso must be completely covered. Boys must be able to keep pants up to an appropriate level and underwear must not show. Hats are not generally worn inside.

## **Smoking**

NPH is a non-smoking facility. There is no smoking in the program.

## **Phones**

There is a phone available for patient use during break times. Cell phones are not to be used without the express permission of the staff and away from the group room. Phones must be off and put away at all other times. Phones that are taken out, left on or phones with cameras will be kept in the nursing station until the end of the day.

## **Contraband**

Belongings may be searched at the discretion of the staff. No dangerous items are allowed on hospital grounds at any time. Inappropriate or unsafe items will be confiscated and returned to parents at a family meeting. Any patient who repeatedly brings dangerous items to the program will be reevaluated and may be referred to another setting.

## **Disaster Plan**

The APHP participates in the UCLA-NPH Disaster Plan. This plan includes a procedure for what to do if patients are attending the program at the time of a disaster and a procedure for deciding whether adolescents should come into program or not in the face of an emergent situation. Partial staff can provide details of that plan.

## **Storage and Patient Possessions**

Any patient possessions which are inappropriate for use in program (e.g. matches, lighters, beepers, cell phones) may be collected and locked up during the program day. These possessions will be returned to the patient at the end of the day.

## **Eating**

Lunches and snacks will be provided for all patients. No food, beverages or gum will be allowed in school or in group therapy. If a general adolescent patient wishes he or she may bring a lunch. Eating Disorder patients may bring food only if indicated by their individual program.

## **Aggressiveness**

Physical violence cannot be tolerated in the partial hospital setting. If a patient's aggressive behavior cannot be managed in this program, he or she will be referred to another setting.

## **Substance Abuse**

Drug screens may be conducted upon admission and at staff discretion at other times. Ongoing evidence of drug use will prompt a reevaluation or a possible referral to another treatment setting.

### **Patient Illness or Injury**

Parents of adolescents will be notified promptly of any illness or injury sustained by their child in the APHP. Patients will be medically assessed and any necessary interventions will be provided. Any patient unable to return to program will be given a place to rest until he or she can be taken home. In case of a serious medical emergency, patient will be taken to the UCLA Emergency room.

### **Unauthorized Absence from Program**

Patients are expected to stay with the group during all program activities, unless they are with their doctor or have permission to be elsewhere. Because APHP is a voluntary program, patients who leave program activities without permission will not be chased or forcibly returned to program unless they appear to be a danger to self or others. Parents of adolescents will be notified within one hour if their child has left program activities without permission. Unauthorized absences may result in a meeting with the patient or the patient and their family before that patient may return to program. Excessive absences may result on referral to another setting.

### **Discharge Planning**

A discharge plan, including appropriate recommendations and referrals for treatment, medication follow up and education will be provided for all patients. Program staff are available after discharge for additional recommendations or consultation as needed by families.

### **Conclusion**

Partial hospitalization is usually brief. Staff works with each family to make the experience productive and the transition into the community as smooth as possible.



