Frontier Behavioral Health

CLINICAL TRAINING ACADEMY

Practices and applied skills for work in community mental health
Welcome to Frontier Behavioral Health’s Clinical Training Academy. This training program is for bachelor’s-level and master’s-level professionals who provide outpatient clinical services to children, adults and families.

This curriculum represents the practices and applied skills you will need to work in community mental health. The in-person courses introduce you to FBH’s treatment approach, which is focused on each individual’s unique circumstances and recovery goals.

Our clinical teams include mental health professionals, peer support specialists, care navigators, nurses, psychiatrists and psychologists. We offer a wide range of evidence-based treatment practices within a Trauma-Informed Care environment.
A. Overview of Clinical and Medical Services

Outpatient Clinical

Information is provided about treatment services available to individuals of all ages, including program descriptions, age groups served, and the array of services provided such as individual, group and family therapy, care management, parenting support and education, psychological testing, psychiatric medication management, and crisis management.

Outpatient Psychiatric

The team approach used at FBH to provide comprehensive care for clients frequently involves referral to ancillary medication management services. This session provides an overview of the services provided by psychiatrists and psychiatric ARNPs for different age groups. Information is provided about medications prescribed for specific disorders, including medications that are not prescribed and why.

Psychological Testing

Provides an overview of psychological services, and testing and consultation available to support the course of a client’s treatment. Content includes determining when a referral is appropriate and, once testing is complete, the process used to inform the treatment team and how the information can inform the client and the team of the best course of treatment.

Inpatient and Stabilization Services

Provides an overview of FBH’s Evaluation & Treatment and Stabilization facilities and the treatment clients receive once admitted. Information is provided regarding the criteria for admission, how to make a referral, what information is required, when medical clearance is necessary, and expectations for a clinician’s involvement during and after care.
B. Providing Outpatient Clinical Services

Orientation to Clinical Services

This session provides an overview of the process for new clients as they complete an intake assessment and are enrolled in services, including how decisions are made with the client related to the type of care they will receive and the course of treatment.

Care Plans

This session reviews the development of a Care Plan, which involves the client, their clinician and their support network, as appropriate, to guide and direct treatment. Goals are developed with strategies on how these goals will be met, including the roles of both the client and clinician.

Crisis Plans

This session reviews strengths-based Crisis Plans, which are developed with a client to identify current stressors, coping skills, and support networks to empower them to work through crisis situations that may arise and to assist them in remaining stable in the community.

Mandatory Reporting

This session provides an overview of the mandatory reporting process for cases of abuse, abandonment, neglect or financial exploitation of a vulnerable adult.

Group Facilitation

FBH offers a myriad of groups, which are available to clients regardless of the program or location at which they are receiving their primary services. Groups address skill building, symptom management, age-related topics, and much more. This session provides an overview of the type of groups offered and describes how to refer a client, as well as staff’s role as a facilitator, how to engage clients in group, and how to document progress.
Episodic Care/Collaborative Documentation/Progress Notes

All FBH clients receive “episodic care” that is agreed upon and developed via the client’s Care Plan. Episodic care entails providing focused treatment interventions related to specific goals and objectives to be reached within an agreed upon time period and strategies for achieving them. FBH promotes the use of collaborative documentation, which includes the client’s participation in documenting their progress toward their agreed upon treatment goals. Information is provided on why and how collaborative documentation is used, how it can be utilized to engage clients in their treatment, and how it can assist with effective time management.

Guidelines for Outreaching Clients

This session provides an overview of outreach services provided by clinical staff and safety precautions taken. Includes topics such as measures to ensure whereabouts of staff are known at all times, staff conducting outreaches in teams, and environmental factors to consider when at a client’s residence or in a public area.

Interventions and Theories Behind Them

This session provides an overview of evidence-based models of therapy and counseling used by clinicians at FBH. Information regarding the theoretical foundations of the interventions used with clients and the rationale behind interventions is provided. Information is also shared about how to determine when a client should be referred to a master’s-level clinician for ancillary treatment.

Release of Information (ROI)

This session covers client Private Health Information (PHI), care coordination with other entities, and the Health Insurance Portability and Accountability Act (HIPAA).
Overview of Common Diagnoses

This training includes an overview of the symptoms of common diagnoses, the importance of providing psychoeducation to clients regarding their mental health diagnoses, and helpful resources for staff to increase their knowledge.

Boundaries/Transference/Counter Transference

Maintaining professional boundaries is imperative in all instances and can be especially challenging when working with individuals who may request support and assistance that could compromise the treatment relationship. This session covers how to maintain professional boundaries and recognize issues of transference and counter transference that may be impacting the treatment relationship.

Accessing Community and FBH Resources

Accessing resources in our community is a critical part of helping clients remain stable. In this session information is shared about some of the most commonly-used community resources and how to access them. Information is also shared about FBH internal resources including Care Navigators, Mobile Community Assertive Treatment (MCAT), Crisis Response Services, Trueblood resources, Recovery Transition Services (RTS), Eastern Washington 2-1-1, and the Regional Crisis Line (RCL).

Clinical Staffing

In this session participants learn how to determine when a clinical staffing is needed, who should be present, and the information that should be shared based on the purpose of the staffing. Case scenarios will be used to illustrate how a clinical staffing can be used that involves input from the client’s team, including the prescriber, clinician and peer.
Illness Management and Recovery

Illness Management and Recovery (IMR) is a model designed primarily for individuals living with serious mental illness, and emphasizes personal goal setting and actionable strategies for recovery. IMR goals are to assist clients in:

- Learning about mental illnesses and treatment strategies.
- Understanding their illness, including symptoms, possible course of the illness, and long- and short-term outcomes.
- Understanding the role medication plays in recovery and symptom management.
- Reducing relapse and re-hospitalization by identifying early warning signs and developing a relapse prevention plan.
- Learning to create networks of special support to enhance recovery.
- Developing coping strategies for persistent symptoms.

Clinicians trained in IMR use a combination of motivational, educational, and cognitive-behavioral techniques. Through their participation in IMR, clients learn to develop recovery goals that are Specific, Measurable, Achievable, Relevant and Time-Bound (SMART). SMART Goals assist clients in formulating specific goals that will build upon their current strengths and implement a plan of action for goal achievement.

The following topics are covered in IMR curriculum:

- Recovery strategies
- Practical facts about mental illnesses
- Stress-Vulnerability Model and treatment strategies
- Building social support
- Using medication effectively
- Drug and alcohol use
- Reducing relapses
- Coping with stress
- Coping with problems and persistent symptoms
- Getting your needs met by the mental health system

Clients who participate in IMR may experience:

- Increased social connection with peers, including other IMR group members.
- Increased awareness of recovery as a personal experience.
- Increased utilization of coping skills and addressing warning signs quickly.
Overview of Cognitive Behavioral Therapy

This session provides an overview of Cognitive Behavioral Therapy (CBT), a form of psychological treatment that has been demonstrated to be effective for a range of problems including depression, anxiety disorders, alcohol and drug use problems, marital problems, eating disorders, and severe mental illness. Numerous research studies suggest that CBT leads to significant improvement in functioning and quality of life.

CBT is based on several core principles including:

- Psychological problems are based, in part, on faulty or unhelpful ways of thinking.
- Psychological problems are based, in part, on learned patterns of unhelpful behavior.
- People suffering from psychological problems can learn better ways of coping with them, thereby relieving their symptoms and becoming more effective in their lives.

CBT treatment usually involves efforts to change thinking patterns. The strategies may include:

- Learning to recognize one’s distortions in thinking that are creating problems, and then to reevaluate them in light of reality.
- Gaining a better understanding of the behavior and motivation of others.
- Using problem-solving skills to cope with difficult situations.
- Learning to develop a greater sense of confidence in one’s own abilities.

CBT treatment also usually involves efforts to change behavioral patterns. These strategies may include:

- Facing one’s fears instead of avoiding them.
- Using role playing to prepare for potentially problematic interactions with others.
- Learning to calm one’s mind and relax one’s body.

**CBT Practice Lab**

In this lab, staff apply CBT basics in case scenarios overseen by experienced masters-level clinicians.
Introduction to Dialectical Behavioral Therapy

Dialectical Behavioral Therapy (DBT) is a cognitive-behavioral therapy that has amassed empirical support for a range of psychological problems in clinical and non-clinical populations. This session introduces participants to the origins and theoretical underpinnings of DBT and the strategies DBT facilitators use to engage people, and guides them through the key elements of the DBT skill-based modules.

DBT Practice Lab
In this lab, clinicians will apply the concepts of DBT to case scenarios under the guidance of DBT-trained clinicians.
D. Crisis Intervention

CIT 101—Crisis Intervention Team (CIT) Training

In this session, CIT theory is reviewed to provide clinicians with an understanding of the dynamics associated with crisis situations, and interventions that can be used to de-escalate a crisis. The session will identify the stages of a crisis, when and how to intervene, and how to develop a viable plan with the client.

ITA 101—Involuntary Treatment Act

This session provides an overview of Revised Code of Washington statutes related to Involuntary Treatment Act (ITA) services for individuals 13 years of age and older. Information is provided about the legal criteria for involuntary treatment, the role of clinicians in developing less restrictive alternatives to involuntary treatment, and the course of commitment.

ITA Q&A

In this session a Designated Crisis Responder (DCR) answers questions related to the ITA process.

Crisis Intervention Application

Crisis intervention is a process through which a clinician identifies, assesses, and intervenes with the individual in crisis to restore balance and reduce the effects of the crisis they are experiencing. The individual is then connected with a resource network to reinforce the change. In this session, clinicians apply what they have learned about crisis intervention theory using scenario-based role plays. This includes identifying where the individual is on the crisis continuum and how to apply intervention skills to de-escalate the crisis and help them to remain safe in the community.

Less Restrictive Alternatives (LRA)

This session covers the basics of LRA court orders, including who is responsible for providing services to clients on an LRA, how violations of an LRA are managed, and what the clinician’s responsibility is when providing LRA services. Suggestions will be shared on how to adjust treatment to support compliance with court-ordered conditions.
E. Substance Use Disorder Treatment

Substance Use Disorders/Co-Occurring Disorders
This session will provide information about the prevalence of substance use disorders and co-occurring disorders in America. Terms such as use, misuse, moderate versus binge drinking, substance use disorder, physical dependence, tolerance, and addiction are some of the terms that will be defined. Diagnoses, the impact of substance use, and the continuum of substance use disorder treatment options are discussed.

Relapse Prevention Planning
Recovering from drug or alcohol addiction takes time, as individuals deal with, among other issues, withdrawal symptoms, and overcoming the urge to use. Relapse—the term used to refer to one going back to using after having been abstinent for a period of time—is an ever-present threat for individuals in recovery. This session addresses the stages of relapse, recognizing triggers, and developing a plan to help prevent an individual from using again. Scenario-based situations are used to illustrate these challenges, along with tips to minimize relapse and techniques that can be shared with clients.

Harm Reduction
Harm reduction is a proactive and evidence-based approach designed to reduce the negative personal and public health impacts of behavior associated with alcohol and other substance use at both the individual and community levels. Harm reduction is an important part of addressing substance use disorders through prevention, treatment and recovery where individuals who use substances set their own goals. Harm reduction incorporates a spectrum of strategies that meet people “where they are” on their own terms, and may serve as a pathway to additional prevention, treatment, and recovery services. Harm reduction works by addressing broader health and social issues through improved policies, programs and practices. In this session, participants learn about harm reduction concepts and strategies, as well as Narcan/Naloxone, and Medication Assisted Treatment.
### ADDITIONAL TRAININGS

- COLUMBIA SUICIDE RISK ASSESSMENT
- MENTAL HEALTH FIRST AID
- MOTIVATIONAL INTERVIEWING BASIC AND ADVANCED
- MANAGEMENT OF AGGRESSIVE BEHAVIOR
- PSYCHOSIS INTERVENTION

### Additional Trainings Outside the Academy

#### Columbia Suicide Risk Assessment (8 hours)

The Columbia Suicide Severity Rating Scale is a questionnaire used by clinicians to complete a suicide assessment. A series of simple questions are asked to assess the severity and immediacy of suicide risk. Staff are trained on special populations and their rates of suicide, how to interview and assess an individual’s level of risk, and how to develop a viable safety plan. This course meets the State of Washington Health Profession’s mandatory suicide prevention training.

#### Mental Health First Aid (8 hours)

1 in 5 Americans has a mental illness, and many are reluctant to seek help or might not know where to turn for care. The symptoms of mental illness can be difficult to detect. Even when friends and family of someone who appears to be developing mental illness can tell that something is amiss, they may not know how to intervene or direct the person to proper treatment—which means that all too often, those in need of mental health services do not get them until it is too late.

This session provides an overview of Mental Health First Aid (MHFA), a groundbreaking public education program that introduces participants to risk factors and warning signs of mental health problems, builds understanding of their impact, and reviews common treatments. MHFA use role-playing and simulations to demonstrate how to assess a mental health crisis, select interventions, provide initial help, and connect people to professional, peer and social supports as well as self-help resources.

MHFA facilitates early detection and intervention by teaching participants about the signs and symptoms of specific illnesses such as anxiety, depression, schizophrenia, bipolar disorder, eating disorders, and addictions. The program offers concrete tools and answers key questions such as “What can I do?” and “Where can someone find mental health help?” Participants are introduced to local mental health professionals and resources, national organizations, support groups, and online tools for mental health and addiction treatment and support.
Motivational Interviewing Basic (14 hours) and Advanced (14 hours)

In this course, clinicians learn about Motivational Interviewing (MI), a collaborative goal-oriented style of communication with particular attention paid to the language of change. MI is a guiding style of communication that empowers people to change by drawing out their thoughts and beliefs as a way to help them resolve their ambivalence about making difficult changes.

Management of Aggressive Behavior (MOAB) (8 hours)

MOAB introduces principles, techniques and skills for recognizing, reducing, and managing violent and aggressive behavior. The goal of MOAB is to teach staff how to protect themselves from injury, and to control individuals without causing them harm. MOAB focuses on empowering staff with the skills necessary to avert conflict and injuries through various de-escalation techniques.

Psychosis Intervention (4 hours)

This training is designed to teach skills and interventions utilized with clients who are diagnosed with Schizophrenia Spectrum Disorder, or who are experiencing psychosis-related symptoms. Goals of this training are to:

- Develop skills to provide psychoeducation to clients impacted by psychosis.
- Develop behavioral intervention skills to help clients reduce distress related to psychosis symptoms.
- Develop cognitive intervention skills to help clients explore how behavior is influenced by perception of events, which allows us to build skills around how we interpret situations to decrease distress, reduce unhelpful thinking, and address negative automatic thoughts.
- Increase provider confidence in working with individuals experiencing psychosis.
HELP FOR TODAY.
HOPE FOR TOMORROW.

Frontier Behavioral Health is a nonprofit Trauma-Informed Care organization that provides clinically and culturally appropriate behavioral healthcare and related services to individuals of all ages in collaboration with community partners. We prioritize the delivery of services for individuals and families who are at high risk, high need or publicly funded. Our professional, compassionate staff actively partner with those we serve in the treatment process, drawing upon their strengths and involving family members and other supports when possible. In most service areas our teams of committed providers includes a Peer Support Specialist who is living with a mental illness and has received specialized training in assisting others in their recovery.
MISSION
To provide clinically and culturally appropriate behavioral healthcare and related services to people of all ages in collaboration with community providers.

VISION
We provide behavioral healthcare services which are fundamental to an integrated healthcare system and which positively impact the lives of those we serve and contribute to the health, safety, and quality of life in our communities.

DIVERSITY, EQUITY AND INCLUSION
At FBH we value diversity, equity and inclusivity in all our relationships—with clients, communities and each other. We believe all people are deserving of dignity and respect. We are committed to continually striving to increase understanding of differences, supporting a culture of belongingness, and addressing biases and social structures that contribute to the perpetuation of social injustices, health inequities and marginalization of any groups or individuals.