

UnityPoint Health
Addiction Recovery & Behavioral Health Services

PARADIGM

Vol. 22 No. 4

TRANSFORMATION AND CHANGE

Looking Back at Our Past

Where We Are Today

Our Vision for the Future

On the Need for Transformation and Change –

In our region and others, the behavioral health care delivery system can be characterized as a fragmented collection of underfunded and undervalued providers lacking efficient and effective coordination across the continuum of care. As a result, service gaps, silos and duplication have created access difficulty and increased healthcare costs. There is no doubt of the need to address these issues for benefit of the communities and the patients/clients we serve. Although many initiatives by well-intended providers have been implemented and there are certainly models of success to emulate, significant need still exists.

At UnityPoint Health in Central Illinois, (UPH) we see this need and believe it is our responsibility to lead efforts to address the problems in our region. We are seeking deeper integration within our own service lines in order to create the best care coordination and service delivery with a focus on outcomes. Working with our community behavioral health partners, we are looking to find areas to integrate behavioral health, addiction, and medical services for the populations we serve. We see the challenges in behavioral health as opportunities to integrate and transform.

Currently UPH offers an array of behavioral health services. These include inpatient psychiatric units for children, adolescents, adults and senior citizens, as well as partial hospitalization, outpatient, behavioral health emergency department, and more. Addiction services span the continuum of care, including detoxification/withdrawal management, inpatient, intensive outpatient, continuing care and medication-assisted treatment options. As we move toward increased integration and coordination, we hope to add more services to this continuum. We know the importance of ensuring patient/client/family needs are met through appropriate services and strong care coordination.

The Illinois Institute for Addiction Recovery (IIAR) has been and will be part of this continuum into the future. For the past 25 years, we have published our news in this publication, The Paradigm. This issue showcases our ongoing efforts to integrate behavioral health and addiction services. As we continue in this mission and focus on the transformation of the delivery of care, we will also be changing how we communicate about our work and progress. As such, this is will be last issue of the Paradigm. Thank you for your support, participation, and communication via this modality. It has been a pleasure!

Going forward, we will continue to share our news on current and future services and initiatives on our newly remodeled website and through other media. We are excited about the future, as we know that by executing our vision, we will help our community and will positively impact the lives of some our most vulnerable.

To those of you who are also working to find solutions, I wish your efforts well in your parallel commitment to transformation and success!



Angela Moore, Vice President
UPH—Central Illinois
Behavioral Health & Addiction Services



Vice President of Behavioral Health & Addiction Services
Angela Moore, MS, MSHA, LPC

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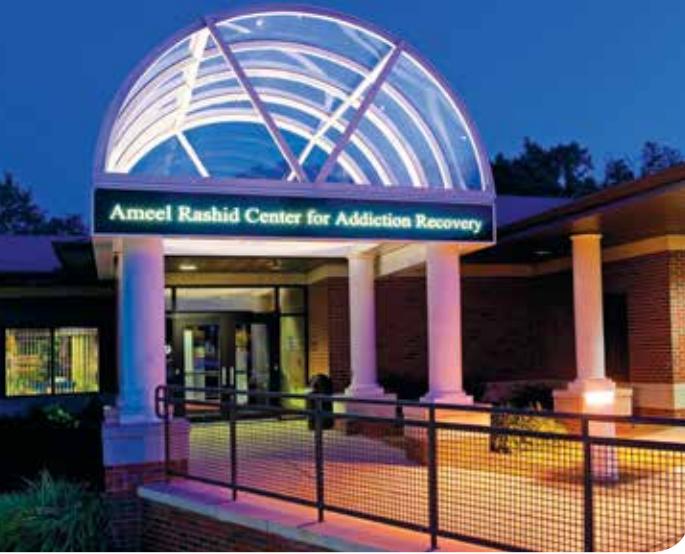
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Addiction Recovery Center at Proctor—Our Story

During the 1970's, a national discourse on alcoholism and addiction was set in motion, which served to inspire the expansion, improvement and availability of treatment for substance use disorders across the United States. At the beginning of this decade, Congress would pass the "Comprehensive Alcohol Abuse and Alcoholism Prevention Treatment and Rehabilitation Act" and the National Institute on Alcohol Abuse and Alcoholism was established. Accreditation standards for alcoholism treatment programs were developed by the Joint Commission on Accreditation of Hospitals and credentialing programs for alcohol and drug counselors began to be offered. By the end of this decade, First Lady Betty Ford would share her story of alcohol and drug addiction and recovery with the nation. Indeed, this was the decade that set the stage for the genesis of the Illinois Institute for Addiction Recovery.

In 1978, spurred by events of the preceding years and recognizing the great need and lack of services in central Illinois, IIAR's founders advocated for chemical dependency treatment services at Proctor Hospital. Initially called the Proctor Chemical Dependency Center, treatment services were provided within Proctor Hospital facility. During these early years, important relationships were forged with key

stakeholders in the community, such as Caterpillar and the AA recovery community. These collaboration efforts were integral to the program's early success. John Schwarzlose, first executive director, in a 2011 interview with William White, described his preparation for opening the unit.

"Proctor Hospital decided that they wanted to have an inpatient alcoholism unit, and they contracted with Dan Anderson of Hazelden to help them plan the unit. I was hired by Dan Anderson and John Smith, the administrator at Proctor, to open the unit. In preparation, I spent five weeks at Hazelden in the fall of 1978. They wanted me to learn everything about Hazelden, so I began the experience by going through the program as if I were a patient. I arrived at Hazelden on a cold, rainy Sunday night and went to Ignatia Hall—the entry unit—suitcase in hand, wet and shivering. An LVN greeted me and took her two hands and wrapped them around mine to warm them and looked at me and said, 'We're really glad you're here.' She didn't know if I was a patient or a visiting dignitary. And I thought, 'How welcoming and accepting!' That's the first lesson I learned at Hazelden. I spent five weeks at Hazelden and learned some incredible lessons that have stuck with me over my career. I went back to Peoria and in February of 1979, we opened a 35-bed treatment center on the fourth floor of Proctor Hospital. The unit was successful from the beginning, due in great part to the relationships we formed with such major employers as John Deere and Caterpillar. Like many other programs of that era, we modeled ourselves on the Minnesota Model." (Excerpt from 2011 interview of John Schwarzlose, IIAR's first Executive Director, by William White, Source <http://www.williamwhitepapers.com/pr/2011%20John%20Schwarzlose%20Interview.pdf>)

That same welcome, "We're really glad you're here," continues to be shared with each and every individual who comes through our doors. Over the next 39 years, the Illinois Institute for Addiction Recovery has been there to help thousands of individuals begin and sustain their recovery journeys from an array of addictions.

History Timeline

1970's — The Beginning

1978— Proctor Hospital Board of Trustees elects to begin treating chemical dependency; staff selected and trained at Hazelden in Center City, Minn.
1979— Proctor Chemical Dependency Center, a 33-bed unit, opened under leadership of first executive director, John Schwarzlose, on the 4th floor of Proctor Hospital

1980's — Program Development

1980— Aftercare Program started
1981— Dennis Pope hired as executive director, following the departure of John Schwarzlose to work at the newly founded Betty Ford Center
1981— Family Program started
1982— Intensive Outpatient Program started
1984— 24-Hour Assessment Program started
1989— 10th Anniversary celebrated

1990's — Service Line Expansion

1993— Pathological Gambling Treatment Program started
1993— Name changed to Illinois Institute for Addiction Recovery to reflect additional treatment services for non-substance addictions
1994— Program Development Consulting Services begun
1995— *Paradigm* magazine created and distributed nationally
1996— Internet website – addictionrecov.org – established
1996— Food, Sexual and Internet Addiction Treatment Services begun
1999— New facility housing patients and administrative offices built on Proctor Hospital

campus. Dr. Ameel Rashid, Medical Co-Director, provided a naming gift for the building
1999— 20th Anniversary celebrated

2000's — New Initiatives

2003— Established Chronic Pain and Addiction Treatment Program
2003— Opened outpatient treatment facility in Springfield, IL
2003— Development of Young Adult Early Intervention Program
2007— Ameel Rashid Scholarship Fund established; First Recovery Walks! One Step at a Time
2008— Opened facility at Ingalls Memorial Hospital in Harvey, IL
2009— 30th Anniversary celebrated

2010's — Change & Transformation

2012— Dr. Kirk Moberg joins IIAR as medical director
2013— IIAR at Proctor Hospital becomes part of UnityPoint Health
2017— DUI Services began
2018— Adolescent IOP Services began
2018— Integration with Behavioral Health Services at UPH Methodist and Proctor, becoming most comprehensive Behavioral Health and Addiction Treatment Service Program in region
2018— IIAR Alumni Program “TRANSFORM” started
2018— Letters of Intent signed to affiliate with others with shared vision
2019— New IIAR website launched
2019— Upcoming 40th Anniversary celebration
2019— Partnerships and Growth. Much more to come!

Two women enjoy the serenity of the Dr. James Bowman Memorial Garden in October

2018. The garden was dedicated to Dr. Bowman in 2007. Dr. Bowman was co-medical director for many years before his death. His dedication was instrumental to the success of IIAR's treatment programs.





IIAR'S ALL-STAR MEDICAL CARE TEAM

Similar to other serious diseases, addiction impacts individuals biologically, socially and psychologically. Sustained recovery requires addressing all three facets. Although education and therapy are key to addiction treatment, medical oversight and intervention provide the stability necessary for sustained recovery. At Illinois Institute for Addiction Recovery, the medical aspect of addiction has been an integral part of treatment services since the Institute opened in 1979 under the direction of Dr. Ameel Rashid, a pioneer in addiction recovery medicine.

In recent years, research into the biological underpinnings of addiction has increased awareness of the need for specialized medical oversight in the treatment of addictive disorders. In 2016, the American Board of Preventative Medicine recognized addiction medicine as sub-specialty and in 2017, the board established a certification process and exam for the new specialty.

According to IIAR's current Executive Medical Director, Dr. Kirk Moberg, "the recognition of addiction medicine by the American Board of Medical Specialties as a legitimate specialty is a huge step forward in moving addiction from the margins into the mainstream of medical practice." Earlier this year, three of IIAR's physicians, Dr. Kirk Moberg, Dr. James Ausfahl, and Dr. Robert Lizer, sat for the exam and received certification in addiction medicine by the American Board of Preventative Medicine. Over 1,000 doctors were eligible to test for the new certification. Moberg, Ausfahl and Lizer were among those who passed.

"Board Certification in addiction medicine has been in the making for many years and now it's finally here and officially acknowledged. We couldn't be more proud of our doctors for not only passing the certification requirement, but being the first in the nation to do so," said Angie Moore, Vice President of Behavioral Health and Addiction Services.



Angela Moore, V.P. Behavioral Health and Addiction Services; Gary Knepp, Regional CQO; Keith Knepp, President, UPH Methodist | Proctor; Dr. Kirk Moberg, Executive Medical Director; Debbie Simon, Regional CEO; Dr. James Ausfahl, and Dr. Robert Lizer



Dr. Kirk Moberg, board certified by the American Board of Addiction Medicine and the American Board of Internal Medicine, Dr. Moberg also earned an MS in health policy and administration and a PhD in biology from the University of Illinois at Champaign-Urbana following his graduation from the University of Illinois College of Medicine.



Dr. Lizer, a graduate of the University of Illinois College of Medicine, is a physician at UPH – Proctor Family Practice Clinic in addition to providing physician services at IIAR. Well-liked by both staff and patients, he recently agreed to help raise money for the UPH Employee Giving Campaign. As a result of his success in aiding fundraising, he was given a pie face!



Dr. Ausfahl, following graduation from the University of Illinois College of Medicine, earned his boards in family practice, occupational medicine, and addiction medicine. Since joining IIAR's medical team five years ago, Dr. Ausfahl humbly shared that he is "the spackling compound, so to speak: I fill in the chinks where there needs to be coverage." Additionally he is often called upon to use his math and computer skills to assist the team in providing specialized care solutions for patients.



Dr. William Hicok, a physician at the UnityPoint Clinic in Bartonville, Illinois, also provides supplemental provider coverage as a member of the medical team at IIAR. Certified by the American Board of Family Medicine, he received his medical degree from the University of Illinois College of Medicine and has been in practice for over 20 years.



Dr. John Voris, Jr., an internal medicine specialist, is also a part of the medical team providing 24/7 coverage to IIAR's patients. Graduating from Ross University in 2012, he completed his residency at the University of Illinois School of Medicine in Peoria and currently specializes in internal medicine at both Peoria area hospital systems, UnityPoint Health and OSF.



Rounding out the provider team, Jennifer Alexander, PMHNP-BC joined the team in June 2017. As a board certified psychiatric mental health nurse, she brings a psychiatric perspective to the treatment team, in addition to general medical support. In describing her role, she shares "I am involved in the daily interactions with patients and their counselors. I see and assess patients on the unit, provide support and encouragement in their recovery, advocate for their needs, and provide medication assistance when appropriate." Her addition to the medical staff signals IIAR's commitment to providing patients with outstanding medical care along the continuum of care. Overall, she states that having a nurse practitioner on the team allows "patients to get more holistic care."

Capping off the IIAR medical team, our amazing nurses are the glue that holds it all together on the front line every day working with our patients. Without their efforts and dedication, our work would not be possible.



Front Row, L-R, Diana Jowers, Patty Hummel, Chatocka Hamilton, Backrow, L-R, Shelly Decker, Shannon Moberg, Monica Zhou, Connie Dorsey

Recovery Walks!



... in 2017, the venue and format of the event was changed to a 5K run/1 mile walk, and efforts were made to reach out to the community for additional support.

Every fall since 2007, the Illinois Institute for Addiction Recovery (IIAR) has sponsored Recovery Walks! The event, a fundraiser for the Ameel Rashid Scholarship for Addiction Recovery, draws former clients, friends and family together in support and celebration of recovery efforts. All proceeds from the event go toward the scholarship for addiction recovery.

Dr. Rashid was instrumental in starting the Proctor Hospital Addiction Recovery Center, serving as co-medical director from inception in 1979 until his retirement in 2005. The Ameel Rashid Scholarship fund was established by him and his family to assist individuals needing financial assistance to reach their recovery goals. Although Dr. Rashid passed away in 2011, his memory and mission continues with each Recovery Walks event.

Traditionally, the event had been held on the IIAR campus and included speakers, a cookout and a quarter mile walk on the adjacent greenspace, along with what organizers describe as “plain old fashioned fun.” But in 2017, the venue and format of the event was changed to a 5K run/1 mile walk, and efforts were made to reach out to the community for additional support.

This year, the 12th anniversary, a Virtual 5K option was added for individuals who wanted to support the cause but were unable to participate in person. On

October 13 at the Junction City Shopping Center, participants enjoyed food and camaraderie with friends and family. The run/walk had 124 registered participants. The post-race refreshments were catered by a local eatery, W.E. Sullivan's Irish Pub and Fare in Peoria Heights. The top three winners in each age category were recognized and received medals. All participants received a T-shirt and a hearty THANKS!

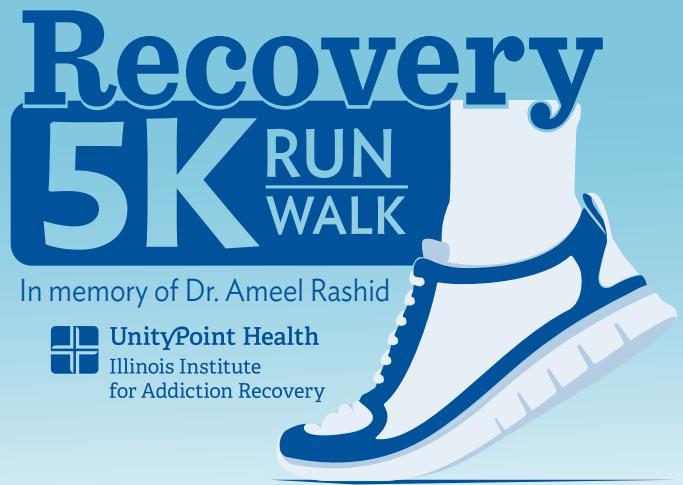


Brittany Ott, Marketing & Admissions Manager awards medal to Jasmine Jones, 1st place woman finisher 30-39 age group at 2018 Recovery Walk Event



UnityPoint Health
Illinois Institute
for Addiction Recovery

1-800-522-3784 | addictionrecov.org



**We would like to thank our many sponsors who
helped make our 2018 5k Recovery
Run/Walk possible:**

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Ameel & Joyce
RASHID



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An extra special thanks to Invictus Woods, Inc.
for sponsoring the coffee & donuts.

FOCUS

Foster Unity, Own the Moment, Champion Excellence, and Seize Opportunities

Here are just a few highlights of some ways we have put these values into action in service to our patients, employees, and our community.



Receptionist Area

In 2017 the outpatient receptionist area and primary group room were remodeled to better serve our patients. The result was more comfortable experience for both our clients and staff. The IIAR building in Peoria received a new roof in 2018, updating the look of the building in conjunction with new landscaping.

During 2018, IIAR supported several community events to raise awareness of addiction issues, particularly opioid overdose and recovery efforts. IIAR was a sponsor at numerous events, including the Peoria Recovery Project at Peoria Civic Center, Pekin Hope Fest at Avanti's Dome in Pekin, Illinois, and Bring Light to the Fight in Peoria.



Group Room



Marty Allsup and Brittany Ott—Bring Light to the Fight Event



Throughout 2018, IIAR clinicians offered numerous professional trainings on addiction and related topics through our Educate Cafes and other venues, such as the above, Marty Allsup, presenting at Summer Educate Café Event.



Dr. Bob Lizer and Jennifer Alexander enjoying a "Pie."



Trunk Or Treat – October 2018 – Brittany Ott, Tabitha Farmer, Johannah Poulsom

Several of our team members participated in the 2nd Annual Trunk or Treat Event held on the UPH Proctor Campus. A beautiful fall afternoon was enjoyed by all!

One of many opportunities for IIAR and behavioral health employees was a series of motivational interviewing workshops conducted by MINT (Motivational Interviewing Network of Trainers) trainer Margo Bristow. Nearly 100 clinicians, nurses, and support staff attended the 2 day workshops, which received many positive reviews from staff.



Margo Bistrow, MI Trainer, Fall 2017

In May 2018, Dr. Lizer was "pied" by Jennifer Alexander as a result of volunteering to be involved in the "Pie a Leader" contest to raise money for the UPH Employee Giving Campaign, which collected money to assist UPH employees and families experiencing unexpected financial difficulties.



Nurses participating were Heidi Boddy, Patti Hummel, Lynn O'Brien, Shelly Decker, Prabha Boddu, Shannon Moberg and Connie Dorsey (not pictured)

A group of IIAR nurses in Peoria started a team building project, making blankets to be donated to the Center for Prevention of Abuse. This project kicked off on July 17th, when a small group met at a local restaurant and completed six blankets! Future blankets will benefit Medicaid patients in local nursing homes who will also enjoy a warm blanket.



Don't Gamble away our Future

Heidi Scuffham, MA

During the 1990's, researchers discovered adolescents were engaging in gambling behaviors in ways similar to adults. The studies also found that gambling problems were common among adolescents as well. Adolescents typically are introduced to gambling through seemingly innocuous family activities between the ages of 9 – 11, and often begin gambling with peers (Looney, 2000). Gambling is attractive to adolescents because it is viewed as an adult activity and winning can boost confidence (Haubrich-Casperson, 1993). Gambling behavior may continue for relaxation, enjoyment, adventure, attention, socialization, or as an escape from negative feelings, such as boredom, depression, or loneliness, and/or problems in the home. Unfortunately, most adolescents do not realize that gambling has a downside (Haubrich-Casperson, 1993).

In 2004 the Illinois Institute for Addiction Recovery designed a gambling prevention and education program entitled *Don't Gamble Away Our Future* to address the

critical need for education and prevention of gambling disorders focused on children and adolescents. The program was funded by a grant from the Office of Juvenile Justice and Delinquency Prevention, with the support of former Illinois senator Ray LaHood.

Springing ahead 14 years, the *Don't Gamble Away Our Future* program has been presented to over 45,000 students in central Illinois since its inception. Currently 28 schools request the prevention program annually, with additional schools added every year.

Today, the *Don't Gamble Away Our Future* program, geared for children and adolescents ages 8 to 18, includes an interactive educational presentation about the definition of gambling, common gambling activities, misconceptions about gambling, how gambling affects students, their families and the community, a profile of a pathological gambler, the progression towards pathological gambling and additional resources.

In addition to education, the program includes a pre-test and post-test to assess knowledge gained as a result of attending, as well as completion of the Modified South Oaks Gambling Screen for Teens (MSOGST) to assess current gambling behavior. All testing information is protected by state and federal laws regarding confidentiality and is only used for data collection purposes. After the presentation, students are given a parent information card to take home, which highlights adolescent gambling including statistics, warning signs and resources for more information.

Although adolescent gambling games have changed since 2004, the need for gambling education and prevention remains. For example, betting on video games has become commonplace in adolescent gambling today. As the types of activities students gamble on have changed, the program has continued to address these changes. School educators, both principals and teachers, have commented on the effectiveness and need for the prevention program in their schools. Many schools have incorporated the program into their yearly curriculum.

Research has shown 85% of adolescents have tried gambling, with 35% gambling at least once a week. An additional 10-14% of youth are at risk of developing a serious gambling problem, approximately double that of adults. Gambling can result in self-destructive behavior including suicidal plans, substance abuse or dependence, and other high-risk behaviors. Research studies suggest education and prevention can be used to curb gambling behavior.

“Each time I present the prevention material, I am reassured of the need for our program by the students’ comments, questions and the data received on the pre and post-tests. The data and student comments re-affirm the belief that children and adolescents need more education regarding gambling’s potentially addictive qualities in order for them to make healthier choices for their future,” commented Heidi Scuffham, Corporate Services Clinician and presenter of the Gambling Prevention and Education program.

Since inception, data gathered from the program has been statistically analyzed three times as to effectiveness of the prevention program and the results shared with professionals. At the 2008



International Gambling Conference in New Zealand, Lisa Taylor, PhD and Pam Hillyard, LCPC, analyzed data from 8,455 students who had participated in the program. They presented their findings in a workshop during the conference, concluding that the the *Don't Gamble Away Our Future*™ preventative program was clearly effective in educating participants about gambling, its myths, and its potential outcomes.”

In 2009, Taylor and Hillyard's findings were also published in the *International Journal of Mental Health and Addiction*. The article, “Gambling Awareness for Youth: An Analysis of the “Don’t Gamble Away our Future™” Program,” explained in depth the findings shared at the International Gambling Conference in New Zealand.

Most recently in 2017, the program was highlighted during a presentation at the 14th Annual Midwest Conference on Problem Gambling and Substance Abuse. Dr. Kirk Moberg, Executive Medical Director at the Illinois Institute for Addiction Recovery at UnityPoint Health shared the results of analysis of 19,000 student scores, which found that “all groups exhibited improvement in test scores.”

Data analysis confirms what educators already know. *The Don't Gamble Away Our Future* program is achieving its purpose of raising awareness and educating children and adolescents about the risks associated with gambling.

Heidi Scuffham has worked with clients in a variety of settings including: adolescents with chemical dependency, individuals with disabilities, at-risk families, foster care and adoption, chronic mentally ill adults and the elderly. For the past 12 years, Heidi has worked at the Illinois Institute for Addiction Recovery presenting the *Don't Gamble Away Our Future* Prevention and Education program to schools throughout Illinois. Using an interactive format, Heidi speaks with students about gambling, misconceptions surrounding it and how a gambling addiction can affect all areas of a person's life.



References:

Haubrich-Casperson, J. (1993). *Coping with Teen Gambling*. New York: Rosen Publishing Group, Inc.

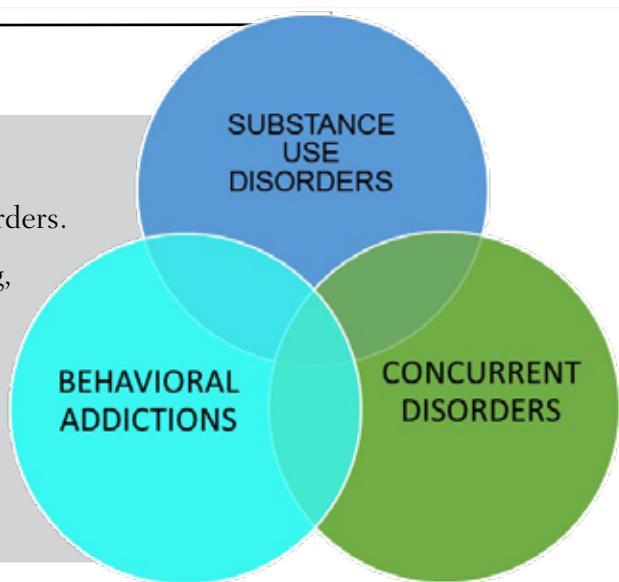
Looney, E.J. (2000). *Some Facts Regarding Adolescent Gambling*. Hamilton, New Jersey.

TRANSFORMATIONAL RECOVERY!

The Illinois Institute for Addiction Recovery at UnityPoint Health – Proctor Hospital continues to be a regional leader in providing evidence-based treatment for substance use disorders and behavioral addictions. Our compassionate team of physicians, nurses, counselors and support staff are ready to meet the physical, emotional, and mental health needs of our patients as we partner with them on their recovery journey.

Who We Serve

- Individuals with alcohol and other substance use disorders.
- Individuals with addictive behaviors, such as gambling, compulsive shopping/spending, internet/video gaming, and food/binge eating.
- Individuals with co-occurring addiction and mental health disorders.
- Individuals with co-occurring addiction and chronic pain issues.



What We Provide

Our comprehensive services span the continuum of care, from inpatient to outpatient, to provide a strong recovery foundation.

We offer an array of treatment services to meet the needs of each individual.

Programs and Services for Adults

Our team is committed to providing comprehensive treatment services to assist you at every step of your treatment journey. Our mission is to provide unmatched addiction treatment experiences every day. We offer:

- Educational groups
- Group counseling sessions
- Individual counseling
- Family education and involvement opportunities
- Leisure and fitness activities
- 12-Step peer support and education
- Individualized recovery and discharge planning
- Medical support as needed

Withdrawal Management

Treatment-based withdrawal management is the first step in building a successful program of recovery. Withdrawal management can occur at both the inpatient and outpatient level of care. Medications are used to support your withdrawal needs most commonly for alcohol, opioids, and sedatives.

Inpatient Treatment

Treatment services are guided by our addiction recovery team comprised of medical providers, nursing staff, and treatment professionals. For individuals who require greater nursing support during early recovery, complex syndromes can be managed in the inpatient setting.

Day Treatment

Day treatment, also known as a partial hospitalization program, is available with or without boarding. This program offers intensive group education and therapy services during the day with the option to stay overnight or transition to a supportive home environment in the evening.

Outpatient Care

Outpatient care, with both daytime and evening hours, provides structured education and group support to reinforce coping skills such as communication and relapse prevention to maintain an ongoing program of recovery.

Continuing Care

Continuing care is a critical part of our recovery program. Individuals continue to utilize the tools they learned in treatment as well as receive support from their counselor, peers, and recovery peer network.

Early Intervention Program

These weekly education sessions target at-risk behaviors, healthy decision-making, and development of communication skills to promote a healthy lifestyle.

DUI Services

We provide a range of DUI related services including DUI evaluations, DUI risk education classes and treatment in a confidential, professional and friendly atmosphere.

Programs and Services for Adolescents

Our team is committed to assisting adolescents and their families with substance-related concerns through providing education and outpatient treatment services. Our mission is to provide unmatched addiction treatment experiences every day. We offer:

- Educational groups
- Group counseling sessions
- Individual counseling
- Family education and involvement opportunities
- Individualized recovery and discharge planning

Outpatient Treatment

Outpatient care, with both day time and evening hours, provides structured education and group support to utilize coping skills such as communication and relapse prevention to maintain an ongoing program of recovery.

Early Intervention Programs

These weekly education sessions target at-risk behaviors, healthy decision-making, and development of communication skills to promote a healthy lifestyle.

PASSION AND A PURPOSE



David Gonzalez

Passion and a purpose are essential to working in the addiction field. Behavioral Health Clinician David Gonzalez at Illinois Institute for Addiction Recovery (IIAR) – Unity Point Health, possesses both qualities. Since high school, when he took his first course in psychology, he discovered that his passion was engaging with people to help them “find a better understanding of self, dealing with obstacles and finding a better way of life.”

Interestingly, his passion and ultimately his purpose were spurred by others’ encouragement and involvement as a youth. “A lot of people invested in me. They saw things in me that I did not see. I want to give that back,” he shared. Having the “right role model, the right teacher and some good direction” led him to pursue a bachelor’s degree in psychology and later a master’s degree in counseling.

While pursuing his education, he put his passion and purpose to use as an intern working with incarcerated inmates in a county jail in Iowa, describing the experience as “amazing!” Here he saw firsthand the effect of substance abuse on individuals’ lives. Later he interned for 10 months in an outpatient mental health agency, gaining experience with mental health treatment. For the next two years he worked with individuals, many of them adolescents, with substance use and mental health disorders in an outpatient setting at the Pilsen Wellness Center in Chicago, IL.

Since joining IIAR in 2017, David has worked as IIAR’s primary adolescent behavioral health clinician. One of the keys to working with adolescents is recognizing that “they do not see the world the same as me or their parents” and figuring out a way to reach that person. Acknowledging that this can be challenging, he believes that “listening and letting them view their perspectives and validating them” makes the

difference in their recovery. Of course, all the IIAR’s counselors have different stories and backgrounds. But they all share the same passion and purpose as David. Our clinical team, led by operations manager Amanda Arrowsmith, does amazing work daily!



Amanda Arrowsmith



Tonya Camacho



Jeff Dodson



Caroline Irrera



Jasmine Jones



Program Technicians – Back Row, left to right, Melissa McAuley, Linda Warnock, Rashmi Ali, Cindy Mansfield, Kyle Pearson, Richard Ruffner – Front Row, Sharol Johnson, Debbie Weathers



UPH Behavioral Health Service Line

UnityPoint Health – Central Illinois has been invested in Behavioral Health Services since 1954 and is proud to offer the most comprehensive inpatient and outpatient services in the region. Our compassionate and committed multi-disciplinary treatment team is comprised of many experts in psychiatry and behavioral health medicine. It is our privilege to partner with each individual to build a pathway to recovery.

We offer a full array of behavioral health services for adults, seniors, children and adolescents, as well as emergency and outpatient behavioral health services. Serving individuals from across the lifespan, our total behavioral health beds comprise about 30% of our total inpatient population. With the expected expansion of this service line, our team members will be poised to help meet the behavioral health needs of our community and region into the future.



Emergency Behavioral Health Services are provided within the UPH Methodist Emergency Department for individuals experiencing a mental health crisis.

Adult Community Behavioral Health is a 22-bed acute psychiatric unit for adults. Treatment is centered on individuals with chronic mental health issues. The focus is on crisis intervention, medication management, milieu/family-based therapy and reintegration into the community.

Child and Adolescent Behavioral Health offers acute inpatient services that include family therapy, group therapy, healthy coping skills and much more. This 23-bed unit serves children ages 4-17 and offers treatment for many mental and behavioral health issues.

The Center for Senior Behavioral Health is an inpatient 18-bed unit that treats patients 65 years and older. The treatment team is committed to offering solutions that address the physical and emotional needs of the older population.

Behavioral Health Outpatient services are located in facilities throughout the Peoria region. Solution oriented psychiatrists and counselors use sound therapy approaches to help patients discover their behavioral patterns, understand their thoughts and feelings and achieve life goals. Services are offered to individuals, couples, families and group. Day treatment options are available and includes medication management services.



**The Hult Center
promotes mental
health for adults
and youth
through a variety
of educational
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The Hult Center for Healthy Living was created in 1987 to promote healthy lifestyles through prevention education. Today, nearly 31 years later, the Hult Center continues to live its mission to “empower people to live healthier lives” by providing programs and services to nearly 70,000 youth and adults each year throughout central Illinois. Due to its longstanding reputation with multiple generations of families, the Hult Center remains a valuable community resource in the areas of health education for sexually transmitted infections, teen pregnancy, mental health issues and chronic diseases such as diabetes and cancer.

The Hult Center promotes mental health for adults and youth through a variety of educational trainings and programs. In 2017, over 10,000 youth and adults received specialized mental health education, trainings, and services. The adult oncology counseling program provides therapy for patients with a cancer

Key Blankenship, MCP, LCPC, NCC, CCMHC

diagnosis at no charge, and offers support groups to cancer patients, survivors, and caregivers. The goal of this program is to enhance participants’ quality of life, help them improve their coping skills and network of support, manage anxiety, and ultimately contribute to their healing process.

The Center’s *Youth Mental Health Matters* program is designed to empower youth and influential adults in their lives (teachers, parents/caregivers, and community leaders) to develop mental health awareness and practice social-emotional skills to learn how to cope and build resilience. This comprehensive program is provided to pre-kindergarten through 12th-grade students throughout central Illinois. The program is customized for each school, and includes topics such as: managing emotions, substance abuse, conflict resolution, behavior management, anxiety, depression, suicide prevention, bullying, and resiliency.



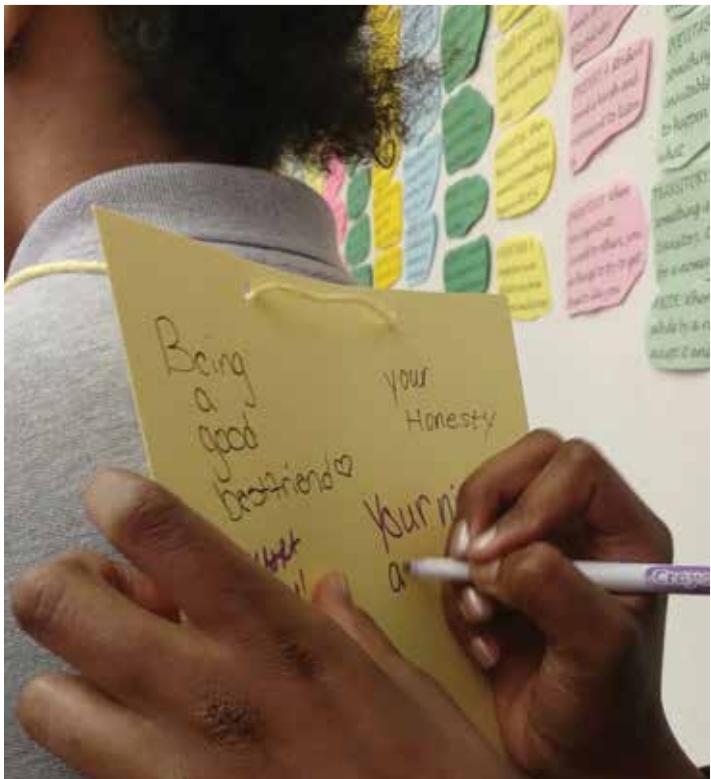
All topics utilize the Illinois Social-Emotional Learning Standards and are designed to be age-appropriate for each grade level. Specialized mental health trainings are also provided to school personnel, parents/caregivers, and community leaders who work with youth to complement programs provided within students' classrooms.

In addition to specialized trainings for school personnel and community leaders, community-wide trainings on mental health are provided to the general public. Two evidence-based trainings that are offered through the Hult Center include *Youth Mental Health First Aid* and *QPR*. *Youth Mental Health First Aid* is training for adults to learn the tools to be able to assist an adolescent dealing with a mental health concern or crisis. This 8-hour training provides in-depth information about specific mental health disorders. *QPR*, which stands for *Question, Persuade, Refer*, is a program that teaches ordinary citizens how to recognize the signs of a suicide crisis and how to persuade a person to seek help.

The Hult Center plays an active role in both suicide prevention and postvention strategies for schools, local communities, and organizations. In addition to suicide prevention education and trainings, professionals from the Center offer individualized consultations with schools and families after a death by suicide to provide best practice guidelines to prevent suicide contagion or "copycat" deaths.

Netflix Release Prompts Programs for Community

The Hult Center also serves as a mental health resource for a variety of community needs and concerns. When the first season of the controversial Netflix series, *13 Reasons Why*, was released, school and local officials requested the Hult Center to address the topic of teen suicide. The Center hosted a community discussion for parents and adults to understand the mental health experts' concerns about the show and



to provide guidelines for adults to talk with youth about mental health and suicide. Upon the release of the 2nd season of the program in spring 2018, the Hult Center hosted a second community talk to provide education and local community resources for topics addressed in the series. This presentation was followed by a Q&A session and created an opportunity for audience members to ask questions regarding how to initiate difficult conversations with youth about the intense and graphic portrayal of topics presented in the series such as mental health issues, school violence, suicide, and sexual assault.

The Hult Center's mental health programs and services are made possible by its generous donors, community grants, and annual fundraisers. The Center holds its annual Whitney's Walk for Life fundraiser, which has raised over \$1.3 million for local mental health and suicide prevention efforts. Other local grants that have supported this program over the past year include Heart of Illinois United Way, Human Service Center, and UnityPoint Health.

Kay Blankenship is a licensed clinical professional counselor who has worked in the mental health field and has taught in higher education for over 20 years. She has extensive background in adolescent mental health and in the design and implementation of suicide prevention screening programs. She is a gatekeeper trainer for suicide prevention and is a consultant for schools and communities for suicide prevention and postvention. Kay is the behavioral health clinical counselor for the Hult Center's educational program for youth mental health. She may be contacted at (309) 692-6650.

Intersection of Behavioral Health & Addiction Treatment Services

Those suffering from mental health disorders are nearly twice as likely to have a co-occurring substance use disorder. The reverse holds true for those struggling with substance use disorders. There are many overlapping genetic and environmental risk factors that could result in either mental disorder or substance use disorder. These include hereditary predispositions, stress and trauma. Abnormalities in brain development that impact responses to stress and trauma could also play a role. Drug use early in life can increase the risk for those susceptible to a mental disorder. Similarly, the symptoms of mental illness may lead to self-medication with illicit drugs (National Institute of Mental Health [NIMH], 2011). Inadequate treatment of co-occurring mental health and substance use disorders may lead to increased instances of homelessness, imprisonment, suicide, and premature death (Substance Abuse and Mental Health Services Administration [SAMHSA], 2017). Recognizing the co-occurrence of substance use and mental illness is necessary for successful recovery. There is an increasing body of knowledge regarding the treatment of both substance use disorders and mental health disorders. Successful outcomes depend on the involvement of all facets of care, the family, and the community.

Inadequate or insufficiently utilized screening tools can lead to missed opportunities to address co-occurring disorders. A deficit in knowledge or understanding of co-occurring disorders can lead to refusal of treatment or poor follow-up. Those with co-occurring substance use and mental health disorders commonly have increased inpatient hospitalizations, legal problems, and overall poorer outcomes (SAMHSA, 2017). Symptoms of mental disorders are severely impacted by substance use disorders leading to higher rates of suicide and social dysfunction. Adverse physical effects of dual diagnosis include increased rates of communicable diseases, liver disease, and mortality (NIMH, 2011).

Treatments for both mental disorders and addiction have come a long way in recent years. Evidence based treatments include individual and group counseling in both outpatient and inpatient settings. Psychotherapy addresses the factors influencing the onset of these disorders, as well as the negative impacts they have on everyday living (SAMHSA, 2017). There is evidence that medications used to treat certain mental disorders can be used to treat opioid, alcohol, and nicotine addiction; however, these treatments need further scientific study (NIMH, 2011). These medications are typically used to reduce cravings and minimize withdrawal symptoms for those going through detoxification. Medications used to treat either mental health or substance use disorders tend to be most effective when used in junction with psychotherapy (SAMHSA, 2017).

UnityPoint Health has taken the lead in implementing an integrated approach to healthcare, working with a number of primary care offices to deliver more integrated healthcare. These primary care offices host a behavioral health consultant who not only screens for substance use disorders and makes the appropriate referrals, but also addresses chronic mental health problems such as grief and loss, anxiety, and depression. The behavioral health specialist also works with the patient to identify behavioral changes and integrated treatment plans to better manage chronic physical and mental health conditions. According to Karen Kewly, LCPC “the most important role we play is to fill the gap” and to “provide a calm to the patient that desperately needs it. She is a behavioral health consultant in several UnityPoint primary care offices. The goal of these behavioral health consultants is to improve the self-management of chronic health conditions, provide brief on-site interventions for those struggling with behavioral change, and increase compliance through follow up appointments and/or telephone calls. Karen states that many of the patients who are referred to her say “I have tried everything”

and are on the verge of giving up hope. The behavioral health consultants are trained clinicians with the ability to utilize tools such as motivational interviewing and cognitive behavioral therapy.

“Warm Handoff” Eases Patient’s Apprehension

Most patients prefer to be seen by someone they consider a part of the treatment team working with their chosen primary care provider. Tammy Burch, LCPC, another behavioral health consultant in UnityPoint primary care offices, states that “many people find mental healthcare stigmatizing. They wouldn’t go to a therapist’s office fearing that someone they know may see their car parked outside. But they will go down the hall and talk to someone.” She described the process as a “warm handoff,” whereby the primary care doctor introduces the patient to the behavioral health consultant and provides an opportunity for them to meet in a comfortable setting. Dr. Jill Wirth-Rissman of UPH Washington described the impact of having a behavioral health consultant as part of her team. “It helps break the barrier and decreases the apprehension of going somewhere they have never been. It really opens people up to the idea of doing counseling” and she states that “they have expertise beyond what I know.” Karen claims many of the patients she sees “didn’t know what it would be like” and that they feel “hopeful and comfortable” after speaking with a licensed mental health professional. Access to mental healthcare is limited in many nearby communities and these interventions reach those patients who would otherwise never see a behavioral health specialist due to stigma, cost, transportation, or long waiting lists.

Additional supportive services can positively impact the outcome of mental health and addiction treatment. These services include detoxification, inpatient rehabilitation, peer-led support groups, and supportive housing. Furthermore, an understanding of the cultural background of those suffering mental health disorders and substance use disorders is pivotal if treatment is to be successful. Models of care need to incorporate the values, traditions, and customs of those they are treating. Treatment for substance use and mental health disorders must also be considered a long-term commitment for both practitioners and clients. Effective treatments include on-going, community based treatment plans that prevent relapse and continue to develop positive coping

strategies (SAMHSA, 2017). Supporting the family or caregivers of those with co-occurring disorders is another important element of successful treatment. Most communities have support groups for families of those with substance use or mental health disorders. Most importantly, mental health and addiction services need to have an integrated approach, addressing both conditions at the same time.

Sustainable mental and physical wellness requires cooperation across disciplines, with collaborative treatment planning and goal setting. Those suffering co-occurring mental health and substance use disorders should also be a part of the treatment planning, developing a client-centered model of care with goals and treatment strategies that are acceptable and seem achievable to them (SAMHSA, 2017). Burch described the future of healthcare with optimism that “every clinic will have a social worker. We won’t have a need for stand-alone therapist offices because mental health will be considered part of general wellness.” The development and implementation of concurrent mental health and substance use disorders treatment is relatively new to the healthcare system and requires collaboration at the system-level. Structural and regulatory bodies must come to a consensus regarding the vision of mental health and addiction services. This may mean taking a different approach to reimbursement, funding, training, and standards of care. Identification and treatment for substance use and mental health disorders need to be integrated into our schools, correctional facilities, community centers, and primary care providers (SAMHSA, 2017).

Chelsea Parker is a certified psychiatric nurse and the nursing professional development specialist for UnityPoint Behavioral Health Methodist/Proctor. Her mission is to improve mental wellness by promoting increased awareness and education, as well as improved access to mental health services. It is her lifelong vision that community members of central Illinois view mental health as an essential part of wellness and feel empowered to utilize available mental health resources. She may be contacted at Chelsea.parker@unitypoint.org.



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TRANSFORM

Your Life | Your Recovery

Connecting individuals early in recovery to community support networks is an important part of IIAR's recovery program. Through collective sharing, mentoring and personal connections with IIAR alumni and support groups, our patients are able to gain a more solid foothold on their personal recovery.

Over the years, IIAR has created opportunities to come together to support these connections, such as the annual Recovery Walk which started in 2007. Each year, IIAR alumni return to help us

"I admitted myself to Proctor to learn how to control my drinking. I went through the entire program and came out instead with the basis to start living again. Now my focus is making each of my days well lived and enjoying what my higher power has given me."

Alumni Testimonial

celebrate and recognize recovery from addiction with their enthusiastic support and participation in our Recovery Walks.

In early 2018, an alumni committee was formed to explore a vision for a robust and active alumni group to continue to meet the need for a bridge to a new life in recovery. Out of this effort, our alumni group

was formed as a way to connect and grow together in fellowship and support through various yearly and monthly activities.

In early June, the alumni committee began hosting monthly recovery celebrations for alumni to share, have fellowship and recognize recovery milestones. In September 2018, the first Annual Recovery Celebration was held with nearly 100 people in attendance. Featuring food, fellowship and music by local musician, those in attendance enjoyed a beautiful fall afternoon with family and friends.

One of the highlights was the announcement of the name selected for the alumni group. TRANSFORM - Your Life | Your Recovery.

The mission of Transform is to:

- Provide avenues of sharing, fellowship, fun, and group activities with others.
- Discover new ways of living and enjoying life.
- Support you as you transform your life and your recovery.

Since then the alumni group has continued to grow. The recent monthly pizza party celebration had over 50 people in attendance! In 2019, the alumni committee plans to add more opportunities for healthy, enjoyable activities for alumni, family and friends to enjoy.



UnityPoint Health

**Help is here...
when you need it!**



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comprehensive Behavioral Health Services
in Central Illinois.**

**We work together with individuals, their families and
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so people with emotional and behavioral problems
can get the help they need.**

**Programs are available for children, adolescents,
adults and seniors, with inpatient, outpatient and partial
hospitalization care.**

***For more information or to schedule an appointment,
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Outpatient Behavioral Health Services - All ages - 309.672.5609

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