



Transitions Counseling and Consulting Welcome Packet for Adult Clients

Thank you for choosing Transitions Counseling and Consulting! We are honored to support you and your family and are committed to providing a great treatment experience.

Below please find some information about the program, resources you can access anytime, and ways you can communicate with your team here at Transitions.

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How to Stay in Touch with Us

Individual Therapy

Your individual therapist will be your primary contact and will provide you with their contact information. They can assist with any scheduling or rescheduling needs, provide referrals, and help with resources. You can communicate with them through the secure patient portal in the Kareo system. You are also welcome to contact the front office at (602) 363-0629 at any time for assistance!

Group Therapy

Prior to the first day of group, the lead facilitator will email you with their contact information as well as details about the group. Please feel free to communicate with the lead therapist any time through the patient portal in the Kareo system. They are available to support any needs of the group member and can help with scheduling. You can also give the administrative team a call for assistance during business hours at (602) 363-0629.

Medication Management & Psychiatry Services

We offer telepsychiatry and medication management through our psychiatry providers. If you are interested, please call us to make an appointment.

You can complete a psychiatry assessment at any point during your care and your therapist may recommend it as a means of supporting improvement of your symptoms – particularly if they are significantly impacting your daily life. For many mental health conditions, the combination of therapy and medication is more effective than either treatment by themselves.

There is no pressure to take medications. Our psychiatry providers will provide feedback on medication options that may be helpful and will discuss potential risks and benefits so you can make an informed decision.

Our psychiatry providers and our administrative team work closely together to ensure timely responses to any questions or needs you might have. We recommend calling the administrative team at (602) 363-0629 for assistance including for help with rescheduling, medication refill requests, or questions about medications.

Anybody enrolled in one of our PHP groups will be seen by a psychiatry provider once per week.

Important Contact Information

Please feel free to email or call us with general questions about billing, office hours, etc.

- Transitions team main phone number: (602) 363-0629
- Billing Questions: billing@transitions counseling and consult.com
- Administrative Questions: help@transitions counseling and consult.com



How to Access the Kareo Patient Portal

There are two ways to access the Kareo Patient Portal:

1. Go to our website at www.transitionscounselingandconsult.com then click on the green "Patient Portal" button on the upper right-hand side of the screen (or the top of the screen if you're using your phone).
2. Go directly to the Kareo Patient Portal Link: <https://portal.kareo.com/app/new/login>

Our Main Website and Social Media Pages

We'd like to invite you to visit both our webpage and our Facebook page – we regularly post updates, resources, and articles that many of our clients and their families find helpful!

Transitions Counseling webpage: www.transitionscounselingandconsult.com

Facebook: www.facebook.com/transitionscounselingaz

Instagram: www.instagram.com/transitionscounselingaz

Although our webpage and social media pages have messaging features, please only use the Kareo Patient Portal or our main phone number for any non-emergent communications that are related to your mental health care. ***If you are in crisis or have a mental health emergency, please call the National Suicide Prevention Hotline at 988. If an emergency occurs, please call 911 immediately. Please also note that email and social media should never be used for urgent or emergency issues.***

What is an Intensive Outpatient Program (IOP)?

IOP stands for Intensive Outpatient Program. IOPs meet three days a week for 2 ½ hours each day. Our 8–12-week IOP focuses on helping group members develop and practice evidence-based skills to help them to cope with very painful thoughts, feelings, and physical sensations in a healthy way. In terms of hours, it's like attending a year's worth of traditional outpatient therapy in the span of 2-3 months.

The skills we teach are grounded in two approaches to therapy called Cognitive Behavioral Therapy (CBT) and Dialectical Behavior Therapy (DBT). We've provided links below for more information on these treatments. Each has been demonstrated to be effective via high-quality scientific studies and are the gold-standard in mental health care.

These skills focus on handling thoughts and feelings in a new way, so they take practice to learn. We believe it's worth the time and effort to learn them because they can be used now and throughout your life. An IOP can be the ideal setting for gaining these skills because the program provides structure, dedicated time, expert guidance from a clinician, and support from peers to stick with it.

This treatment works for a great many people and is effective with a variety of concerns including anxiety, depression, coping with difficult school and/or family challenges, low self-esteem – and even self-harming behavior and suicidal thoughts.

While in an IOP, Transitions recommends that group members also work with an individual therapist. The group focuses on mastering skills in a supportive environment, while individual



therapy is a place to work in detail on concerns that require greater privacy, time, and focused treatment. If the group member doesn't have a current individual therapist, our administrative team can help you schedule an appointment.

What is a Partial Hospitalization Program (PHP)?

PHP stands for Partial Hospitalization Program. The name can be a misleading because there is no hospital stay involved. Rather, it's a specialized 4–6-week program that offers a focused course of treatment like a hospital, but participants return home every evening and on the weekends. This group meets 5 days each week for 4-5 hours per day. The goal of the program is to support long-term improvement of severe mental health symptoms.

This type of treatment is particularly helpful for those who have recently left hospital-based care as it serves as the first step in a gradual "step down" in treatment. This planned step-down helps to avoid an abrupt reduction in supportive treatment (which can result in the need for returning to the hospital shortly after leaving).

While participating in PHP, clients will meet with a psychiatry provider weekly. There is no pressure to take medications if you do not wish to do so. The meeting is to confirm that this type of specialized care is still the best fit for your needs. However, you can discuss medication at that session if you choose.

During the PHP, we focus on two approaches to therapy called Cognitive Behavioral Therapy (CBT) and Dialectical Behavior Therapy (DBT). We've provided links in the resources section for more information on these treatments. Each has been demonstrated to be effective via high-quality scientific studies and are the gold-standard in mental health care. The group is designed for daily opportunities to practice and develop mastery in these key skills for long-term wellness.

Getting Ready for Group

Once a start date is confirmed, the lead therapist will email you information about the group including dates, times, and locations. We invite you to respond to that email to confirm that we have your correct contact information. Clients typically communicate with their therapist to report any absences, ask questions, and to schedule appointments. Our team also provides regular updates on treatment topics, and we want to be sure they reach you!

What can I expect on the first day of group?

The therapist greets group members in the lobby shortly before the start time and escorts them to the group room.

Once in the room, group members take a check-in sheet, pen, and clipboard, and take a seat. Each group member is invited to use the check-in sheet to communicate how they are feeling and how the group can help them support them that day. The check-in sheet includes evidence-based screening measures that can help the therapist to assess safety and track progression of symptoms over the course of time so that treatment can be adjusted to address specific needs.



The therapist will introduce the group and any new members and will go over the guidelines for the group, which we've included below. Each group session will include an activity or lesson plus opportunities for each member to share their own thoughts, feelings, and experiences to the extent that they feel comfortable doing so. Groups include a 10-minute break and restrooms, water, and other amenities are available.

Midpoints and Discharge Sessions

A midpoint session is scheduled with the lead therapist with the goal of meeting with you to discuss your treatment plan, progress, and your feedback.

We will also discuss an approximate discharge date and begin creating an aftercare plan to support you following graduation from the group. The discharge session mimics the midpoint session, confirms the discharge date, and provides future treatment recommendations and/or referrals.

Safety Concerns During Treatment

You should know that the therapists and interns at Transitions Counseling and Consulting are considered mandated reporters by the state of Arizona. This means that we are required to tell the appropriate authority if we receive certain types of information. For instance, if we receive information that suggests that a child under the age of 18 or a vulnerable adult might be experiencing abuse, neglect, or exploitation of any kind we must report it. Making a report does not automatically mean that such abuse or neglect is happening. Reports are reviewed by the Arizona Department of Child Services or Arizona Adult Protective Services and the process is meant solely to keep others safe.

We are also required to disclose when there are indications that a client may be a danger to themselves or to another person. These types of safety concerns are assessed at each group session during the daily check-in process. This includes asking if you have experienced any urges to harm yourself, engaged in self-harming behaviors, or experienced thoughts of ending your own life or another person's life.

If a group member reports they have experienced any of these safety concerns facilitators will take the following steps to ensure safety:

- The therapist will talk with you privately in an office outside of the group setting to assess the concern and create a safety plan. Occasionally, clients need emergent hospital-level treatment, and our team will help to coordinate that service.
- Sometimes, group members have experienced suicidal thoughts for a long period of time before starting treatment and will continue to do so across weeks or months while actively learning new coping skills in therapy. We invite you to communicate with us openly about concerns of this type so that we can arrive to a helpful, safe solution for monitoring changes in the severity or intensity of symptoms.

Attendance & Safety

Please notify the facilitator if you will be absent 24 hours in advance. This can be done via email with the facilitator or by calling the administrative team. As there is often a wait to enter these



specialty groups, after three absences we will invite a waiting client to take your place in the group. We fully support and welcome your return in the future when your schedule permits attendance.

Illegal substances (nicotine, drugs, alcohol, etc.) are prohibited in group. Please refrain from bringing lighters, matches, and vaping devices. Group members under the influence of any substance may not attend group. No weapons are allowed.

General Group Guidelines

Confidentiality

- *Most* of what said in the group remains confidential indefinitely, which means that what was discussed in the group will not be shared anywhere else. However, it's ok for you to share what you learned in group!
 - There are a few specific things that therapists must tell others if we learn about them. These include:
 - Any thoughts, plans, or attempts to hurt yourself or someone else.
 - Any indication that a child or vulnerable adult is being harmed or neglected.
 - When we say "tell others" that may include other professionals like therapists, emergency room staff, police officers, etc. We will only tell them the minimum amount of information needed to keep you safe.
- At times, it's helpful to share other information about your treatment – but we will only do so with your written permission. Each person is unique in what they would like to share so it's best to have a conversation to ensure we are all on the same page.
- If you see one of the therapists in a public place, we will not interact with you unless you choose to say hello to us first. We do this to protect your privacy because you might not want to discuss how you know us – and it's your right to choose to tell others or not.

In-Group Expectations

- We prefer that you limit the use of cellphones during group to make sure the group is private and to help limit distractions.
- Group is a judgment-free zone. Try not to use terms such as "good" or "bad" when talking about yourself or others. Instead, try using words such as "healthy" or "adaptive."
- It's tough to start sharing in group – but it's worth it! The more you share, the more we can offer support and feedback. Group is a safe place to practice healthy and effective relationships.
- Feedback is used to support and relate to each other. Our goal isn't to "fix" anyone. We want to understand and support each other. One way to help is to share things that worked



for you in the past such as by saying, “when I experienced that, this helped me” to offer support.

- If you experience moments of strong, painful thoughts or feelings during group, first use your skills to help tolerate the distress until it lessens. If needed, you can signal to the group leader that you’d like to step out of the room to practice using a coping skill until it improves. As we practice healthy relationship skills together, we encourage group members to actively set boundaries around difficult topics. For instance, its ok to ask, “Can we change the subject?” There is no pressure to share why you need to set that boundary.
- Be aware of language, tone of voice, and details that might be upsetting to others. This includes discussing inpatient/residential treatment experiences, use of profanity, or other potentially triggering content.
- Tissue rule – feel your feels. In therapy we encourage you to feel your feelings. It’s a safe place. Tissue boxes are placed strategically around the room.

Additional Resources

Videos

- An Introduction to Cognitive Behavioral Therapy (CBT)
 - <https://www.youtube.com/watch?v=bUOaHsxe8OQ>
- An Introduction to Dialectical Behavioral Therapy (DBT)
 - Marsha Linehan Channel, founder of DBT - 4 Skill Modules of DBT
 - [Dr. Marsha Linehan: The 4 Skills Modules of DBT - YouTube](#)
- The Power and Purpose of the Teenage Brain
 - [Dan Siegel - Brainstorm: The Power and Purpose of the Teenage Brain \(Family Action Network\) - YouTube](#)
- An Introduction to Acceptance Commitment Therapy (ACT)
 - Dr. Russ Harris Channel, founder of ACT
 - <https://www.youtube.com/channel/UC-sMFszAaa7C9poytIAmBvA/videos>

Websites: General Resources

- American Psychological Association: [Articles, videos, books, and other resources on a wide range of mental health topics](#)
- National Alliance on Mental Illness (NAMI): [NAMI Homepage](#)
- NAMI : Kids, Teens, Young Adults: [NAMI Kids Teens Young Adults](#)
- National Center for PTSD: [Resources for clients, friends, and families](#)



- Anxiety and Depression Association of America: [Articles focused on identify and coping with many forms of anxiety and depression](#)
- National Institutes of Mental Health: [NIMH Mental Health Resources for Mental Health](#)

General Reading

- [The Body Keeps the Score](#)
 - Bessel van der Kolk
- [The Happiness Trap](#)
 - Russ Harris
- [Self-Compassion: The Proven Power of Being Kind to Yourself](#)
 - Kristen Neff
- [The Seven Principles for Making Marriage Work](#)
 - John Gottman
- [Is It You, Me, or Adult A.D.D.? Stopping the Roller Coaster When Someone You Love Has Attention Deficit Disorder](#)
 - Gina Pera
- [The Feeling Good Handbook](#)
 - David Burns
- [Hold Me Tight: Seven Conversations for a Lifetime of Love](#)
 - Sue Johnson
- [The Mindful Path to Self-Compassion: Freeing Yourself from Destructive Thoughts and Emotions](#)
 - Christopher Germer & Sharon Salzberg

Phone Applications

Virtual Hope Box - Free

- Apple: [Virtual Hope Box on Apple](#)
- Android: [Virtual Hope Box on Android](#)
- Function: Provides simple tools to help clients with coping, relaxation, distraction, and positive thinking when painful thoughts or feelings arise.

Headspace – Free Trial

- Website: [Headspace Meditation App](#) (Available on both Apple and Android)
- Function: Guided meditation and focusing exercises for kids, teens, and adults.

Tactical Breather - Free

- Apple: [Tactical Breather on Apple](#)
- Android: [Tactical Breather on Android](#)



- Function: Guides users through breathing exercises to promote relaxation.

Calm - Free

- Website: [Calm Meditation and Sleep App](#) (Available on both Apple and Android)
- Function: Guided meditation and soothing sounds to support relaxation and sleep.