

Tarzana Treatment Centers

Youth Services

SERVICES OFFERED



Substance use

At-Risk

Outpatient (OP)

Intensive Outpatient (IOP)

Recovery Support Services (RSS)

Residential

Medications for Addiction Treatment

Outreach & Education



Mental Health

Individual Therapy

Family Therapy

Psychiatry Services

Case Management

Outreach & Education

LOCATIONS

San Fernando Valley:

- ▶ MH outpatient services
- ▶ SUD outpatient and IOP services
- ▶ SUD MAT services

Antelope Valley:

- ▶ MH Outpatient services
- ▶ SUD Outpatient, IOP, and Residential services

Field-Based Services:

- ▶ SUD and MH programming are offered at many schools and field-based sites throughout the Los Angeles area, SF Valley, and Antelope Valley

SUBSTANCE USE PROGRAMMING

- ▶ Programming at all levels of care (OP, IOP, Residential) includes the following 3 components:
 - ▶ Group Counseling
 - ▶ Individual Counseling
 - ▶ Care Coordination
- ▶ Treatment planning begins at intake and continues until discharge to ensure individualized treatment and progress towards identified goals
- ▶ Safety planning is conducted throughout treatment and all youth are screened for suicide risk and safety concerns
- ▶ Youth can enroll in MAT programming if they are actively engaged in OP/IOP/residential program
- ▶ **Insurance:** medi-cal, private insurance, Kaiser, private pay clients

INDIVIDUAL COUNSELING

Discussion topics:

Treatment plan goals

Triggers

Relapse prevention plan/Safety Planning

Identifying motivation for sobriety

Identifying unhealthy associations

Coping skills

Addictive Thinking Patterns

GROUP COUNSELING

- ▶ Group sessions are designed to support discussion among patients with guidance from the facilitator to support understanding and encourage participation on issues related to substance abuse.
- ▶ Allows for opportunity to give and receive peer feedback and to increase sense of sober support; decreases isolation
- ▶ Group facilitators/SUD counselors are trained to recognize and address suicidal ideation that may arise during group discussion
 - ▶ All groups address healthy coping skills and reduction of risk factors



GROUPS



WHO SHOULD BE REFERRED?

- ▶ Youth presenting to medical centers with severe intoxication
- ▶ Youth caught with substances at home/school/etc
- ▶ Youth who are actively using substances or who have a hx of intoxication
- ▶ Youth who are at-risk for using substances due to environmental risk factors
- ▶ Youth with co-occurring substance use and mental health difficulties

MENTAL HEALTH PROGRAMMING

- ▶ Programming addresses variety of MH concerns and diagnoses in individual sessions 1-2x/week; groups are supplemental as needed
- ▶ Psychiatry services are available to youth enrolled with a MH therapist or case manager
- ▶ Parents of enrolled youth can engage in MH therapy services as well
- ▶ Safety planning is conducted throughout treatment and all youth are screened for suicide risk and safety concerns; safety planning and supporting youth in crisis is a core component of all treatment
- ▶ **Insurance:** Medi-cal, select private insurance carriers

INDIVIDUAL & FAMILY THERAPY

Common Presentations & Concerns:

Depressive Sxs/SI/safety concerns

Anxiety (generalized, social, phobias)

Trauma-related concerns

Concerns related to body image or dysmorphia, self-esteem

Impairment related to attention deficits

Oppositional behavior concerns

Family dysfunction/communication deficits

GROUP THERAPY

- ▶ Group sessions are designed to support discussion among youth with guidance from the facilitator to support understanding of symptomology
 - ▶ Aim is to learn skills, process experiences, and provide exposure to safe social situations
- ▶ Normalizes experiences among youth and increases sense of connection; decreases isolation

GROUPS

LGBTQIA+
Support

Process
Groups

Art
Therapy

CASE MANAGEMENT



-community linkage (housing, financial, transportation)



-Resume building



-Vocational/employment assistance



-Tutoring/ after school services



- Volunteer Assistance



-Skills practice



- Self-care

WHO SHOULD BE REFERRED?

- ▶ Youth presenting with MH concerns that cannot be addressed in a primary care setting
- ▶ Youth with behavioral concerns causing impairment at home or at school
- ▶ Youth with hx of trauma or loss that would benefit from processing
- ▶ Youth with recent mood changes or change in behavior that cause impairment or significant distress
- ▶ Youth with hx of MH diagnoses who are presenting with ongoing symptoms
- ▶ Youth who have been released from psychiatric hospitalization and need ongoing support

REFERRAL PROCESS

Initial Contact/Referral is received

TTC Navigation contacts parents/guardians

Appropriate program is identified

Intake Appointment is scheduled

Questions?