

Princeton House Behavioral Health

today

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COVID-19 Updates: Please visit princetonhouse.org for the latest information and updates related to COVID-19.

50 YEARS OF CHANGING LIVES

50 years ago in 1971, the organization that is now Penn Medicine Princeton House Behavioral Health opened as an inpatient campus with a licensed bed capacity of 84 and a typical census between 50 and 70 patients a day. Since that time, behavioral health care has evolved significantly. In addition to advances in pharmacology and evidence-based practice, care has shifted from inpatient stays that were measured in weeks or even months to briefer stays driven by a model of delivering the least intensive, most clinically appropriate treatment approaches tailored to each individual.

Yet over the past five decades, one thing has remained constant: Princeton House's commitment to responding to critical needs and serving as a resource for patients, families, providers, and the broader community.

"From the beginning, Princeton House has been dedicated to advancing the mental health of our community," says Marguerite Pedley, PhD, Senior Vice President of Penn Medicine Princeton House Behavioral Health. "We've had a long-standing focus on treating the whole person, including being one of the first in the state to adopt a dual diagnosis model that addresses mental health and substance use disorders concurrently."

Today, Princeton House is comprised of a 116-bed inpatient facility with acute partial hospital and intensive outpatient services at five outpatient sites throughout Central and Southern New Jersey. The care continuum also includes the 22-bed Princeton Center for Eating Disorders, a six-bed Behavioral Health Emergency Department, and an Electroconvulsive Therapy Suite.



As the team across Princeton House launches a multifaceted celebration of this momentous anniversary, it marks an opportunity to reflect on the many lives that have been changed over the years through the thoughtful delivery of high-quality, compassionate care.

"Patients often come to us at an utter crisis point in their lives, and we take that responsibility to heart," says Peter J. Thomas, PhD, Vice President of Outpatient Services at Princeton House.

"Our goal is to enable them to return to their regular lives with greater stability and an expanded set of tools to deal with stresses and challenges."

Princeton House stands on a firm foundation of caring professionals who have paved the way to foster ongoing advances in treatment and technology. More recently, this includes responding effectively to a tsunami of need during the COVID-19 pandemic.

"Nine business days after closing our in-person outpatient programs, we launched an entirely new virtual program to meet the needs of our community and beyond," says Thomas. "Many of those who contributed to this transformation have described it as one of the most challenging and rewarding efforts of their careers."

"Our team is at the heart of what makes Princeton House so special," adds Pedley. "They are consistently committed to excellence, quality, and innovation—and to delivering the best patient experience possible to those we serve. We're proud to celebrate these ideals as we mark Princeton House's 50th anniversary."

Stay tuned for additional 50th anniversary coverage in the fall issue of Princeton House Today.

The Power of **PEERS AND PRESENCE** for Men



Now over a year into the pandemic, the world around us is shifting toward a higher degree of normalcy as restrictions ease in many areas. Yet Erin Webb, LAC, Primary Therapist at Princeton House’s Moorestown outpatient site, has noticed a conflicting development for many patients in the Men’s Program: a greater degree of hopelessness.

“It can feel like we’re no longer all in this together, especially with such differences in opinion across society regarding comfort levels,” says Webb. “Resuming life as it was before can be an uncomfortable experience for those with trauma, because change is difficult and suppressed emotions tend to resurface.”

The goal of the Men’s Program is to help patients establish an internal and external sense of safety and stability. Because men often cultivate communal purpose through activities with others—something less feasible during the pandemic—the opportunity to connect with peers is one benefit of group therapy that has taken on added significance.

“The world became smaller during the pandemic, but group therapy has helped patients shift direction to connect with those facing similar struggles,” adds Webb. “We tend to look around to others to see if we’re safe. When patients have a safe space and a voice among their peers, they settle into the realization that they’re not alone and can hold energy for each other.”

BRINGING SAFETY TO THE SESSION

That sense of safety and presence—which contributes to relational regulation—is also important for behavioral health providers to nurture and emanate, according to Webb. On a personal level, she works to achieve this via telehealth in the following ways:

Prior to each session:

- › Review patient charts to bring compassion for their experience to the forefront
- › Take time for a personal grounding exercise like paced breathing or mindfulness practices
- › Check the surrounding environment for anything that might seem distracting

During each session:

- › Breathe at an even pace, exaggerate movements or sound, or take a deep breath and sigh it out; this invites patients to mirror these stress-reducing actions
- › Lead grounding exercises, such as asking patients to name five things they can see on their peers’ screens to reinforce that they are not alone
- › Pause to give space for the intention behind patient input rather than quickly responding, even though silence in a virtual setting may feel more uncomfortable than in person
- › Engage in movements that would likely be made in an in-person setting, such as stretching or standing up on breaks

“When we ask those who have been avoiding emotions to turn toward them and work through them, it can be difficult for both patients and providers,” says Webb. “Seeking support from others in the field and centering yourself before each session can be beneficial. Whether it’s shaking out stress with music or hugging a pet, figuring out what makes you feel grounded will in turn positively impact your patients.”

Celebrating the Team and a Year of Telehealth

As Princeton House approached the one-year anniversary of care delivery via telehealth, staff at the Moorestown site began discussing a way to recognize and honor the entire team for their incredible work throughout a year marked by extraordinary challenges. This idea—immediately embraced by leadership—blossomed into Spirit Week, a fun and engaging way to celebrate this milestone.

“Our team took on so much throughout the pandemic, including rethinking our services to create an entirely new platform of care for patients,” explains Cassandra Ruiz, Moorestown Office Manager and a member of the Spirit Week planning team. “This was an opportunity for them to take a breath and just be, rather than do.”

“I’m so proud to have helped facilitate this for the staff,” adds Ruiz. “At the end of the day, we are who we are because of our team. It’s what makes us Princeton House.”

Through daily emails and activities, the week was designed to spread joy across Princeton House outpatient and inpatient sites with the following themes.

MUSIC DAY

provided upbeat pandemic playlists of songs that helped people power through 2020. Use the QR code below to listen on Spotify.



Quarantine Cooking Day

shared favorite recipes and created a Quarantine Cookbook.



“I am in awe and humbled by the work of my professional colleagues.”

Iris Perlstein, LCADC, LPC, ATR-BC,
Clinical Specialist/Coordinator
with First Responder
Treatment Services



A Snapshot of Care

Princeton House pivoted its care delivery model during the pandemic to continue to reach as many patients as possible. From the start of telehealth on March 17, 2020 to late May 2021, the team facilitated:

5,200
ADMISSIONS

109,000
VIRTUAL
OUTPATIENT VISITS

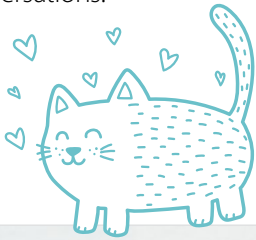
55,000
VIRTUAL GROUPS

25,000
VIRTUAL
INDIVIDUAL/FAMILY
SESSIONS

Laptop Silver Linings Day

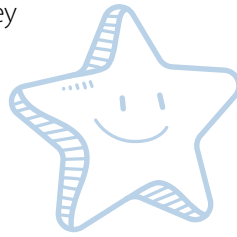


focused on the pandemic positives, from weddings and new homes to reconnecting with family, pet adoptions, and even the hilarity of one staff member's cat becoming enamored with her on-screen clinical manager. A broader silver lining: mental health and wellness now has a place at the forefront of many conversations.



Affirmation Day

reminded staff how important they are as individuals and how vital they are to patient care.

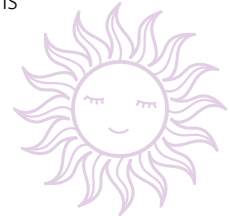


ONE YEAR/ WEAR GREEN DAY

invited the team to don something green to celebrate growth despite loss and hardship, something patients and staff reflect on every day. It also featured a celebratory Town Hall presentation.

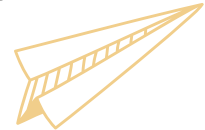
Wellness Day

featured virtual chair yoga and meditation sessions, an interactive wellness presentation, and "Lavender Bags" of self-care items for every staff member.



Pay it Forward Day

encouraged staff to brighten the day for peers through small acts of kindness.



TELEHEALTH Platform Even More Secure

The BlueJeans telehealth platform used by Princeton House now incorporates Switchboard, a unique digital platform. In addition to improving access to virtual care, Switchboard streamlines the complex behind-the-scenes process of coordinating daily multiple links and passwords for group therapy sessions while enhancing security. Through this HIPAA-compliant system, patients receive a unique link for each therapy day.

"It's like having a new key to a different secure room each day," says Jodi Pultorak, LCSW, Executive Director of Outpatient Services. "With hundreds of patients accessing care across our sites every day, this system ensures that everyone is in the right place on the right day while preventing unauthorized access."



*"Creativity.
Ingenuity. Grit.
These are the hallmarks
of our Princeton House team
that we take pride in
every day—and celebrated
during Spirit Week."*

Neal Schofield, MD, Chairman of
the Department of Psychiatry

CULTIVATING *Hope* FOR ADDICTION RECOVERY



Initially designed to address the opioid epidemic, the new HOPE (High-Risk Opiate Prevention and Education) for Recovery curriculum at Penn Medicine Princeton House Behavioral Health has evolved to fit the needs of patients dealing with behavioral health issues and any type of addiction. This six-to eight-week adult outpatient curriculum was launched during the height of the pandemic via telehealth.

“Our goal is to cultivate a lifestyle and skill set so that life is worth living and addiction is not such a daily challenge,” says John Guldner, LPC, Senior Primary Therapist at Hamilton. “While vigilance is always necessary, those struggling to overcome addiction can get to the point where their efforts are not exhausting.”

The evidence-based curriculum is a carefully structured set of psychoeducation groups providing knowledge and tools that patients can apply specifically to recovery efforts. It also focuses on stressors related to the pandemic, such as isolation, and how these challenges impact recovery. Themes include:

LIVING SOBER Addressing day-to-day ways to cope, the curriculum focuses on areas like recognizing growth, gratitude, mindfulness, opposite-to-emotion skills, and post-acute withdrawal symptoms to watch for.

RELATIONSHIPS In addition to communication, rebuilding trust, and setting healthy boundaries, letting go of guilt is an important focus when working to create value in relationships. Patients learn to separate past actions and behaviors from their present identity.

STAGES OF CHANGE While change takes time, therapists help patients understand that it won't be hard forever. Other topics include realistic goal setting and recapturing values that may have become obscured during substance use.

RELAPSE PREVENTION The curriculum provides specific tools to address urges and recognize triggers or warning signs of relapse—especially those that may be unexpected, like hearing a song that can put someone in the mindset of a past time when they used substances. When triggers are recognized early, they can be addressed more easily.

SOCIAL SUPPORT A focus on building networks of support can help sustain recovery after discharge. The curriculum also helps patients prepare for the transition to a more fully functioning world as pandemic restrictions ease.

“We’re seeing patients at a very vulnerable time in their lives and at a unique point in our history,” says Guldner. “We work to provide them with as many opportunities and as much information as they can absorb while helping them navigate the challenges of our current times.”

“Hope *is a fitting name for this curriculum, because it is possible to have a better life,” he adds. “People say you can’t change, but I have the good fortune to see people challenge that idea every day. It’s an incredibly rewarding experience.”*

In-Person Partial Hospital Patient Feedback

After a pandemic-necessitated hold on in-person partial hospital programming, Princeton House began in-person sessions across its outpatient sites last fall. To assess patient satisfaction with this modality, a recent survey incorporated feedback from 53 adult patients at various locations. Results found that:

- ✓ 100% were confident in COVID-19 safety measures
- ✓ 96% were confident in a transition to the virtual outpatient program
- ✓ 100% felt that the program helped them
- ✓ 73% of Women's Program participants were comfortable in a blended group setting when needed

"These clear, confident results speak to our team's incredible work in ensuring that patients receive the best care possible during these stressful times—especially when we were all dealing with our own personal challenges related to the pandemic," says Manager of Quality Performance Improvement and Accreditation Nate Mahoney, LPC, who analyzed the data. "Access to in-person treatment is important for higher acuity patients, and we're proud to deliver that care safely and effectively."

"Program was excellent, supportive, and helpful. I learned a lot!"

Outpatient News

Telehealth rules now limit treatment across state lines. Princeton House is pleased to be able to offer in-person services to out-of-state residents within daily commuting distance to our Hamilton office, namely, those from Pennsylvania. Safety measures like masks and social distancing still apply.

To refer a patient, please call 888.437.1610.



First Responder Team Welcomes David Clauser



David Clauser, EdD, has joined the First Responder Treatment Services team as Peer Support Specialist to further enhance offerings for first responders. Dr. Clauser began his career as a U.S. Marine, serving as a company-level infantry officer. Following his military service, he embarked on a 35-year career in education as a teacher and later a building administrator. More recently he has put his shared experience with addiction recovery to use with programs in Essex and Middlesex Counties, and as a nationally certified Peer Recovery Specialist administering a sober-living funding program. Dr. Clauser holds degrees from Lehigh University, Montclair State University, Kean University, and Seton Hall University.



Addressing Burnout During Challenging Times

Princeton House Therapist Chelsea Williamson, MSW, LCSW, presented *Managing Burnout in the Midst of Chaos* for the Penn Medicine Community Education audience and the New Jersey Hospital Association/St. Elisabeth University. These virtual offerings covered burnout warning signs, tools to manage stress, and helpful resources.

Vaccines Available to Patients

Princeton House is now offering single-dose COVID-19 vaccines to eligible inpatients. Depending on vaccine availability, Princeton House inpatients who need a second dose of a vaccine while they are receiving care may also be vaccinated.



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Chaplain Interns Look Inward to Enhance Outcomes

Princeton House’s chaplain intern program enables participants—who have roots across various religions and disciplines—to develop relational skills on a very human and emotional level so that they can effectively deliver spiritual care. The learning process is steeped in self-reflection, helping them achieve shifts in awareness that foster personal growth and in turn benefit patients.

“We have a diverse and unique clinical learning environment at Princeton House, just as our own individual narratives are unique,” explains Imam Jawad Bayat, MA, ACPE Certified Educator and Manager of Pastoral Care and Clinical Pastoral Education. “My goal is to help chaplain interns actualize what’s within them and understand how that’s reflected in outcomes.”

Bayat notes that part of this involves tapping into their own vulnerability, which is the birthplace of growth. When chaplain interns reflect on and evaluate their experiences with patients in individual and group sessions with Bayat, they also are encouraged to examine their own values and assumptions. Concerns are processed together through open discussions that serve as a microcosm for their broader work.

“We encourage curiosity and wonder so that we can learn from each other and improve interactions with those we serve,” adds Bayat, who is one of the first Muslims and the first Afghan-American to be a certified educator with the Association of Clinical Pastoral Education (ACPE).

Princeton House’s chaplain internship is part of the Clinical Pastoral Education program at Penn Medicine Princeton Health, which is one of about 400 programs in the U.S. to earn accreditation by the ACPE, speaking to its high level of quality. One unit of CPE at Princeton House requires 100 hours of education and 300 hours of clinical work. The skills that chaplain interns develop as part of this program are particularly important in behavioral health.

“Those struggling with behavioral health issues are experiencing a disruption in their own narrative and an increased sense of vulnerability,” says Bayat. “We’re here to tend to them in a healing way. Just as I help interns become more aware of how their journeys intersect with others, they serve as guides to hold space for patients and nurture the growth of the human spirit.”

Learn more at princetonhcs.org/pastoraleducation.