



**ACCREDITATION
RISK MANAGEMENT**



**RESEARCH
INTERNAL
EXTERNAL**



CONFERENCES



INSURANCE

Outdoor Behavioral Healthcare Center

January 2016 Newsletter



The OBH research scientists had a great showing at their one day Research Preconference at the WTS. Pictured here (L to R). Steve Javorski, Mike Gass, Anita Tucker, Lee Gillis, Keith Russell, Ellen Behrens (not pictured: Joanna Bettmann Schaefer and Christine Norton)

Accreditation

The year has been extremely successful for the AEE-OBH accreditation process. At the OBH Center we continue to help support the process of accreditation in organizing review teams, interfacing with the AEE accreditation staff and Council members, helping to schedule accreditation visits, training OBH Council members in the accreditation process, providing administrative support by sending UNH graduate students to each visit, and helping programs manage their processes. Two recently accredited OBH programs have reported that at least one family selected their program over others because they were accredited.

7 Accredited Programs. This Fall we were happy to add three new accredited programs: Aspiro, Elements, and Redcliff Ascent. These programs added to Summit Achievement, Open Sky, Evoke at Entrada, and Anasazi total 7 accredited programs in 2015!

Upcoming Visits: In the Fall 2015 there were site visits to Evoke Cascades, New Vision Wilderness – Oregon, Legacy Adventure, SUWs of the Carolinas, and Marimed with an upcoming visit scheduled to Outback in February. We aim to finish up with our goal of getting all the programs required to be accredited by the Spring of 2016 done early!

Conferences

We had a great showing this fall at professional conferences with a variety of presentations coming up in 2016.

AEE. Dr. Gass, Dr. Gillis, Dr. Norton, and Dr. Tucker all attended and presented at the Association for Experiential Education conference totaling in 7 different workshops. Our Saturday morning workshop titled “Current developments in adventure therapy: What works and why it that important” was a full house even with its 9am timeslot.

Council on Social Work Education: Dr. Bettmann and Katie Massey-Combs were in Denver in October and presented on the use of transport in OBH programs. This is one of the leading conferences in social work and we were glad to have a presence there!

NATSAP. With NATSAP coming up we will again have a great showing. Dr. Gass, Dr. Behrens, Dr. Tucker, Dr. Norton, and Dr. DeMille will be there presenting in different formats with a total of 7 workshops throughout the conference. Dr. Gass will be working with NATSAP to help educate NATSAP programs around research opportunities through a series of workshops focused on promoting better research.

Other 2016 Conferences. In addition, OBH research scientists and affiliated researchers have submitted multiple workshop proposals to present at numerous conferences in 2016 including the American Psychological Association’s Conference in Denver, CO and the Wilderness Therapy Symposium Regional Conference in Asheville, NC.



*Dr. Anita Tucker &
Dr. Michael Gass,
OBH Center Directors*



*Dr. Joanna Bettmann Schaefer
& Katie Massey Combs
presented a symposium on the
impact of transport of OBH
clients*



*Dr. Steven DeMille & his
colleague, Marilyn Montgomery
at the Society for the Study of
Human Development
Conference*

Risk Management

The OBH Center continues to support program members in collecting yearly risk management data in effort to show an accurate appraisal of OBH Programs as well as help to improve upon the risk management of the programs. OBH Council member programs have been collecting detailed information about incidents that occur during OBH treatment since 2001. It is now the longest-running operational risk management database in the outdoor programming industry.

2014 Data. In 2014, 16 OBH council member programs contributed data about injuries, illnesses, run away attempts, and therapeutic holds that occurred during calendar year 2014. These programs 2,038 clients in 2014, producing 126,028 client field days and 69,582 guide field days. Of the 2,038 clients served, 1,902 clients completed treatment. The U.S. Center for Disease Control and Prevention estimated the national average rate of injuries for adolescents (14-19) treated in U.S. hospital emergency rooms was *0.34 per 1000 days* in 2013 (WISQARS, 2014). When using the same injury criteria the 2014 Outdoor Behavioral Healthcare Council (OBH-C) rate was *0.17 injuries per 1000 field days*, approximately one-half of the national average rate for adolescent injuries. In 2014, OBH-C clients were exposed to 842 times less restraint time than the average 12-17 year old in inpatient mental health care in the US ([NASMHPDRI, 2010](#)). The full 2014 risk management report is available on the OBH Center website (<http://www.obhcenter.org/#!/clients/c1a4e>)

2015 Data. Please remember your yearly risk management data is due no later than April 1, 2016. Please make sure that you either submit your data with the manual reporting form or the online version - no internal documents please. The instructions are in the "OBH Council" Dropbox folder under "OBHRC" – "Risk Management".

Research Updates: Internal

Research Manual: We continue to evolve our support of the research endeavors of the OBH member programs. One of our aims is to make gathering research easier and more streamlined for programs. We recently have contracted with Mike Petree of Petree Associates to create an user friendly data entry manual including screen shots to help research directors navigate the research process. We aim to complete this by the NATSAP conference and are holding a special workshop for the research coordinators of all OBH/ NATSAP member organizations on Friday February 12th from 10-11:45 "Shining stars for you to see: What your research could truly be."

Follow Up Data Collection: Due to IRB restraints the OBH Center is unable to directly see individual client outcome reports for data monitoring; however, due to a significant ongoing lack of post discharge data, the OBH Center is supporting a proposal by the OBH Research Committee to fund Petree Associates to actively monitor data collection. With this partnership, Petree Associates will provide programs with a monthly view that shows whether or not a program is meeting their requirements for OBH membership in terms of research engagement. This will take the onus off of the volunteer requirements of the OBH Research Committee, who can focus on other needed aspects of research.

Revising NATSAP Forms: The OBH Center, in particular, Dr. Tucker is working with Neal Christensen, Mike Petree, and Steve Javorski to collect suggestions from OBH programs regarding possible changes to the NATSAP youth, parent and staff forms. We will be sending out a survey in January collecting suggestions from OBH program research directors. Be on the lookout!!

Research Updates: External

Publications. We have had an AMAZING year in terms of our scope and impact on the empirical literature across disciplines. So far in 2015, the research scientists and affiliated researchers of the OBH Center created 13 new publications, available for reading, plus had an additional 5 new articles accepted (in press) and submitted for review 7 additional papers. That is a total of **25** new pieces of research out in the professional literature!!!! Below are our most recent additions to the field:

Published in 2015

- Behrens, E. (2015). Preface: A case for clinical case studies. *Journal of Therapeutic Schools and Programs*, 7, 5-7.
- Bettmann, J., Clarkson Freeman, P., & Parry, K., (2015 – Online First). Differences between adopted and non-adopted adolescents in wilderness and residential treatment. *The Journal of Experiential Education*. doi: 10.1177/1053825915569056
- DeMille, S. M. & Burdict, M. (2015). A theoretically anchored and multi-modal treatment approach in an Outdoor Behavioral Healthcare program. *Journal of Therapeutic Schools and Programs*, 7, 19-30.
- DeMille, S. M., & Montgomery, M. (2015 – online first). Integrating narrative family therapy in an Outdoor Behavioral Healthcare program: A case study. *Contemporary Family Therapy*. doi: 10.1007/s10591-015-9362-6
- Kivlighan Jr, D. M., Li, X., & Gillis, L. (2015). Do I fit with my group? Within-member and within-group fit with the group in engaged group climate and group members feeling involved and valued. *Group Dynamics: Theory, Research, and Practice*, 19(2), 106.
- Koperski, H., Tucker, A., Lung, D.M., & Gass, M. (2015). The impact of community based adventure therapy programming on stress and coping skills in adults. *The Practitioner Scholar: Journal of Counseling and Professional Psychology*, 4(1), 1-16.
- Massey Combs, K., Hoag, M., Roberts, S., & Javorski, S. (2015 – Online First). A multilevel model to examine adolescent outcomes in Outdoor Behavioral Healthcare: The parent perspective. *Child and Youth Care Forum*. doi 10.1007/s10566-015-9331-0
- Norton, C.L., Carpenter, C. & Pryor, A. (2015). Adventure therapy around the globe: International perspectives and diverse approaches. Champaign, IL: Common Ground Publishing.
- Ritchie, S.D., Wabano, M.J., Corbiere, R.G., Restoule, B., Russell K. C., & Young, N.L. (2015). Connecting to Anishinaabe Bimaadziwin (The Good Life) through outdoor adventure leadership experience. *Journal of Adventure Education and Outdoor Learning*. doi: 10.1080/14729679.2015.1036455.
- Russell, K. C., Gillis, H. L., & Heppner, W. (2015 – Online First). An examination of mindfulness-based Experiences through adventure in substance use disorder treatment for young adult males: A Pilot Study. *Mindfulness*. doi: 10.1007/s12671-015-0441-4
- Tucker, A., Bettmann, J., Norton, C.L., & Comart, C. (2015- Online First). The role of transport use in adolescent wilderness treatment: Its relationship to readiness to change and outcome. *Child and Youth Care Forum*, 44(5), 671-686. doi 10.1007/s10566-015-9301-6

Tucker, A., Norton, C., DeMille, S., & Hobson, J. (2015 – Online First). The impact of wilderness therapy on physical and emotional health: Utilizing an integrated approach in Outdoor Behavioral Healthcare. *Journal of Experiential Education*. doi: 10.1177/1053825915607536

Gass, M., Tucker, A. R., & Karoff, M. (2015). 1999: History of the Outdoor Behavioral Healthcare Research Cooperative (OBHRC). In W. White (Ed.), *Stories from the field: A history of wilderness therapy* (pp. 119-126). Jackson, NH: Wilderness Publishers.

In Press

Liermann, K., & Norton, C.L. (In press). Positive relationship outcomes between parents and adolescent children following a therapeutic wilderness program for struggling teens. *Contemporary Family Therapy*.

Roberts, S., Stroud, D., Hoag, M. J., Massey, K. (In press). Outdoor behavioral healthcare: A longitudinal assessment of young adult outcomes. *Journal of Counseling and Development*.

Tucker, A., Norton, C., Itin, C., Hobson, J., & Alvarez, M.A. (In press). Adventure therapy: Non-Deliberative group therapy in action, *Social Work with Groups*.

Tucker, A., Paul, M., Hobson, J., Karoff, M., & Gass, M. (in press). Outdoor Behavioral Healthcare: Its impact on family functioning. *Journal of Therapeutic Schools and Programs*. doi: 10.19157/JTSP.issue.08.01.05

Tucker, A.R., Widmer, M., Faddis, T., Randolph, B., & Gass, M. (in press). Family therapy in Outdoor Behavioral Healthcare: Current practices and future possibilities. *Contemporary Family Therapy*.

Insurance



Court Case. The OBH Center and in particular Dr. Gass is working closely with the Autism Health Insurance Project (<http://www.autismhealthinsurance.org/>) and Denials Management, Inc. with Mary Covington to support the funding of OBH programs. In particular we are preparing legal grievance documents for an upcoming court case with United Healthcare. Main additions provided to the court case include documentation about the Accreditation program and summation statements about newly published research on the outcomes of OBH by the OBH Center research scientists and affiliated researchers. The hope is that successfully presenting this case will pave the way for other appeals as well as the proactive funding by insurance companies for OBH services.

Language. We continue to encourage OBH programs to use the terms “**INTERMEDIATE CARE**” both in their marketing materials and their websites, and as OBH researchers we have focused on including this language as well in our publications. In addition, we also strongly encourage programs that once they are accredited you "broadcast/strongly publicize" the accreditation achievement.

**Please visit us on our website:
www.obhcenter.org**