

DBT CITI:

Comprehensive Implementation & Training Initiative

Two-Part Ten-Day Immersive Experience

Portland, Oregon

Application Form

PART I: June 20th - 24th, 2016 | PART II: January 9th - 13th, 2017

**PLEASE SUBMIT ALL INDIVIDUAL APPLICATIONS PLUS THE TEAM APPLICATION
IN A SINGLE TEAM ENVELOPE**

Why learn DBT?

Dialectical Behavior Therapy is a comprehensive psychosocial treatment that has been repeatedly proven to be effective for hard-to-treat clients with numerous serious problems. This includes people with borderline personality disorder who are chronically suicidal and/or who are addicted to drugs. Since the inception of DBT, researchers and clinicians have broadened its use to new types of problems and clients including: suicidal and depressed adolescents, women with binge eating disorder and/or bulimia, depressed elderly patients, couples with severe marital conflict, and inmates in correctional facilities. Research and clinical experience show that DBT is more effective for the treatment of intense emotion dysregulation, which can lead to impulsive self-destructive behaviors (e.g. suicide, self-injury, dropping out of treatment, crises and conflicts with treatment staff, substance abuse, etc) than treatment as usual.

DBT is primarily aimed at reducing two considerable targets that interfere with standard psychosocial treatments: life-threatening behavior (self or other) and therapy-interfering behaviors (e.g. non-attendance, non-compliance, lack of collaboration). Often when these two targets are treated, standard treatments have a greater effect. To the degree that dysregulated mood or emotions cause the problems and life-threatening or treatment-interfering behaviors are impeding treatment, DBT is the best treatment available. In addition to targeting life-threatening and therapy-interfering behaviors, DBT also targets quality-of-life-interfering behaviors using evidence-based treatments and interventions to help clients build a life worth living.

TEN-DAY DBT CITI:

- **Part I: Content Acquisition & Drafting a Provisional DBT Program Plan.**

This five-day onsite training in Portland, Oregon will provide an immersive experience into all elements of DBT's theoretical, structural, and clinical content, including DBT skills. Like the early days of Linehan's DBT Intensives™, we will incorporate evening sessions devoted to learning DBT skills *and* how to run DBT skills training groups.

Learning will include: didactic presentations, experiential exercises, review and discussion of video and audio tapes, and small-group practice exercises. We will apply an active learning method in our overall approach that includes: **learn it** (trainees learn fundamental content elements); **see it** (trainees see the clinical strategy modelled for them), **do it** (trainees practice what they just learned and observed).

To ensure that teams are able to return to home with clear directions about how to build a DBT program in their unique setting, **Dr. Dimeff will meet individually with each DBT team** to better understand their program and to establish their DBT program goals.

- **Strengthen Clinical Capability and Build a DBT Program Between Parts I and II.**

At the conclusion of Part I, trainees will receive detailed instructions for practicing elements of DBT and building their DBT program. Additionally, trainees will also receive a DBT examination intended to help them prepare for the DBT Certification tests and to further strengthen their mastery of concepts. Trainees will first take the exam closed book, then open book. Assignments completed during this interim period will be presented at Part II.

- **Part II: Strengthening Core Competencies and Refining Program Direction.**

The intent of Part II is to refine and receive feedback on DBT clinical skills and to ensure that each DBT program is headed in a direction of building a DBT program to fidelity. Specifically, each team will present a clinical DBT case, a clinical sample, and their DBT program. Dr. Dimeff will highlight those elements that are “on-model” and will work with the team on those elements that are “off-model.” Dr. Dimeff will drill down further on concepts and strategies that require further refinement and practice. Evening sessions will again be included to allow for ample opportunities to view and critique DBT therapy session.

Please fax or email completed applications to:

Christopher Williams
cwilliams@pdbti.org
Portland DBT Institute
5200 SW Macadam Ave Ste. 580
Portland, OR 97239

The selection of DBT teams and the team members is imperative for the successful implementation of DBT. This application serves multiple purposes :

- 1) To help us determine if the proposed team and members are good candidates for the DBT Comprehensive & Training Initiative.**
- 2) To assist Dr. Dimeff & Mr. Homan in learning about your team and team members before the beginning of DBT CITI.**

Participation in DBT CITI requires each team and team member to commit to attending all training sessions, and completing all assignments, during both of the 5 day training blocks, and the 6 month interval.

DBT CITI Prerequisites

- All team members should have read both the book and the skills manual prior to the first day of the Part I session.
 - **Linehan, M. M. (2015a). Cognitive Behavioral Treatment of Borderline Personality Disorder. New York: Guilford Press.**
 - **Linehan, M. M. (2015b). Skills Training Manual for Treating Borderline Personality Disorder. New York: Guilford Press.**

Available at www.guilford.com

TEAM APPLICATION

(EACH TEAM ONLY NEEDS TO SUBMIT ONE COPY OF THIS PORTION OF THE APPLICATION)

Name of Team Leader: _____

Names of Team Members: minimum of three members to maximum 10 members, including leader. If questions regarding construction of team, please contact Dr. Dimeff

Name	Planned Role on Team

Please give a brief description of the treatments provided at your treatment facility (individual psychotherapy, case management, pharmacotherapy...)

List one or two specific team goals your team has for this training.

In a nutshell, describe your team and indicate your team's goals with respect to building a DBT program. Attach additional pages if necessary.

INDIVIDUAL APPLICATION

Name: (Please Print)

Employer:

Job Title: _____ **Counselor** _____ **Nurse** _____ **Psychiatrist**
_____ **Social Worker** _____ **Psychologist**
_____ **Occupational/Vocational Therapist** _____ **Other**

Employer Address:

Work Telephone: _____ **Fax Number:** _____

Email: _____ **Yes! Sign me up on your email list**

(Information will not be shared with third parties)

Name of DBT Team Leader:

Other members of training/treatment team applying for DBT CITI:

Length of time team has been together, and population working with:

Degree: _____ **Year:** _____

Area of study: _____

Theoretical orientation(s) of your training

The intensive training lasts from 8:30 am to 5:00 pm each day and on some evenings there will be homework assignments. In addition, it will not be possible to answer pages or phone calls during the training or leave for other job responsibilities. Arrangements need to be made to meet these requirements. Will you arrange:

Coverage of outside responsibilities so you can come at 8:30 am, stay until 5:00 pm, and do up to 30 min of homework on some evenings?

Yes No

Coverage for your work so you will not have to leave or take calls during the training?

Yes No

Please give a brief description of your experience learning and applying behavioral therapy:

Please give a brief description of your experience practicing mindfulness, mindfulness based practices, and/or delivering mindfulness based therapies:

In your current or past clinical work, have you taught behavioral skills and/or psycho-educational materials to clients?

Yes No

If yes, please give a clinical example:

As described above, people have a lot of reasons to learn DBT – from an inherent interest in the treatment, borderline personality disorder, or suicide to a desire to reduce burnout, meet expectations of supervisors, or try something new. The following questions are designed to help plan the training and will not be used as a basis for your team’s acceptance. There are no right or wrong answers!

What are your primary and personal goals for learning DBT?

What problems do foresee in participating in and completing DBT CITI?

What plans do you have to overcome the aforementioned problems? Please also indicate whether you have discussed these potential barriers with your team.
