

UPCOMING COURSE

Presented by Portland DBT Institute

DBT CITI:

Comprehensive Implementation & Training Initiative

Two-Part Ten-Day Immersive Experience
Portland, Oregon
Application Form

PART I: January 9th - 13th, 2017 | PART II: May 22nd - 26th

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 IntensivesTM, 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 <u>cwilliams@pdbti.org</u> 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. (1993). Cognitive Behavioral Treatment of Borderline Personality Disorder. New York: Guilford Press.
 - Linehan, M. M. (2014). 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	
facility (individual psychot	tion of the treatments provided at your treatment therapy, case management, pharmacotherapy)	
List one or two specific tea	m goals your team has for this training.	
	r team and indicate your team's goals with program. Attach additional pages if necessary.	



INDIVIDUAL APPLICATION

Name: (Please Print)			
Employer:			
		P	
Work Telephone	;	Fax Number	?* <u></u>
Email:	ım Leader:		es! Sign me up on your email list
Other members o	of training/treatm	ent team applyi	ng for DBT CITI:
Length of time te	am has been toget	ther, and popula	ntion working with:
	ation(s) of your trai		



Please briefly describe your clinical experience (types of treatment applied treatment modalities you provide, population you work with, size of caseload, ect.)
Training in DBT (check all that apply):
Read Dr. Linehan's articles/book chapters
Read Dr. Linehan's skills training manual (All participants must read
before coming)
☐ Yes, I have read the book
 I will read the book before commencing the training.
Read Dr. Linehan's treatment manual (All participants must skim befor coming)
Attended a DBT study group at my current agency or past workplace
Attended a DBT workshop
(please circle: ½ day, 1 day, or 2 days)
Received DBT consultation(s) (please describe):
Conducted DBT interventions yourself (please describe):



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 you team.