

The Child & Adolescent Center at Rogers Memorial Hospital

Outcome Study News

Evaluation of symptom severity changes in children and adolescents undergoing intensive residential psychiatric care.

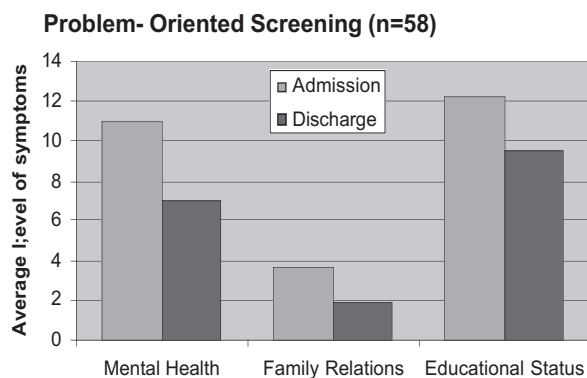
We help children understand their specific mental health challenges -- depression, anxiety, ADHD, problems at school -- and teach them coping skills. We then provide real-life opportunities for them to practice those skills. The result is greater self-esteem and self-responsibility.

Our goal in providing intensive psychiatric treatment for children ages 12 to 17 in a residential setting is to reduce symptom severity and improve their ability to function at school and at home.

Our multidisciplinary approach combines:

- Comprehensive evaluations
- Intensive child and adolescent psychiatric sessions – group and individual
- Medication management
- Adventure-based therapy
- Cognitive behavioral therapy
- Family therapy

Graph 1

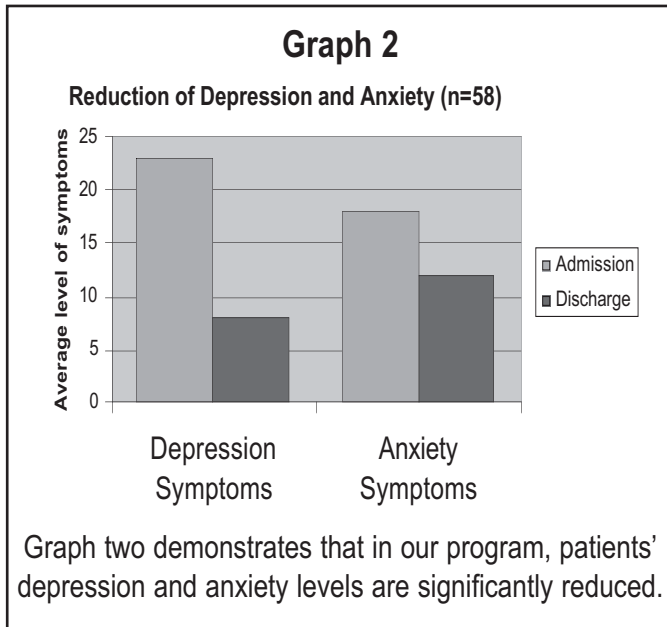


Graph 1 of the POSIT shows that our patients achieve significant improvement in their positive cognitive thinking.

The effectiveness of our comprehensive treatment approach is demonstrated by our patients' reduction in symptoms in three key areas:

1. Changes in thinking

Positive cognitive changes are necessary to maintain improvements in self-image and behavior. This area is measured with the Problem Oriented Screening Instrument for Teenagers (POSIT), a screening tool that uses a yes/no response format to identify problems in 10 functional areas, including mental health, family and peer relations and educational status.



2. Level of functioning (depression and anxiety)

Mental health disorders often are accompanied by depression and anxiety disorders. The severity of these disorders must be reduced and stabilized to maximize the likelihood of a relapse-free recovery. This area is measured with two instruments:

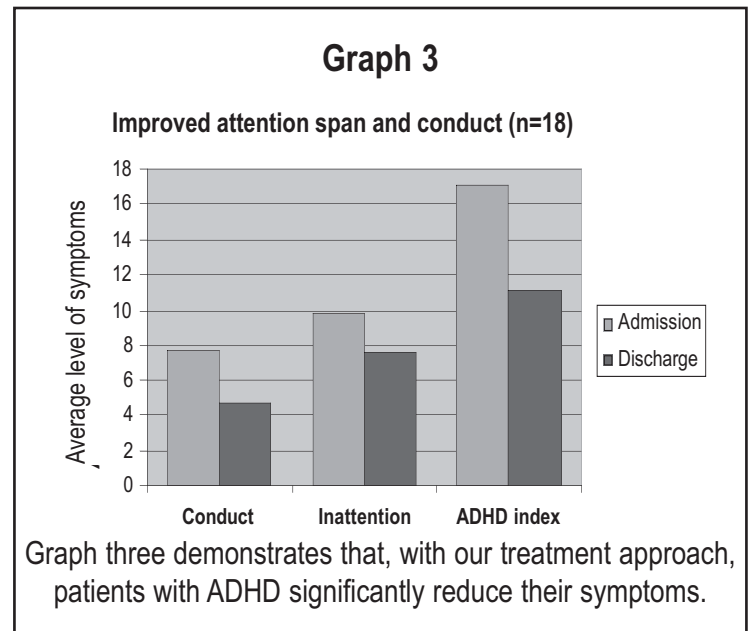
- Pediatric Anxiety Rating Scale (PARS), a 50-item questionnaire used to assess the severity of anxiety symptoms in children and adolescents.
- Beck Depression Inventory (BDI) is a 21-item questionnaire used to rank the severity of depression in children and adults.

- 0 – 9 = minimal depression
- 10 – 16 = mild depression
- 17 – 29 = moderate depression
- 30 – 63 = severe depression

Our patients' average score at discharge = 8, which is minimal depression.

3. Co-occurring issues

Many children admitted to the Child & Adolescent Center have attention deficit/hyperactivity disorder (ADHD) symptoms. If this disorder is suspected during the patient's initial in-depth evaluation, the treatment team will request an additional assessment called the CONNERS. This instrument appraises a child's conduct, inattention and level of ADHD symptoms.



These changes show that the Child & Adolescent Center is helping adolescents to function better with family members and school assignments as well as showing significant reduction of their depression and anxiety symptoms severity.

Our medical staff includes three full-time child and adolescent psychiatrists, with CBT services directed by a nationally recognized expert in CBT treatment. The program is managed by a certified recreational therapist with 20 years experience in adventure-based learning in psychiatric and residential settings. The center is located on 50 private, wooded lakefront acres midway between Milwaukee and Madison, Wisconsin. We encourage families and professionals to visit our facility and talk with our staff.

To schedule a tour, call 1-800-767-4411 ext. 309.