

The  
Hill  
Center  
for Women  
at McLean Hospital

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Dialectical Behavior  
Therapy Solutions  
for Trauma,  
Borderline Personality  
and Related Disorders

## **Patient Handbook**

*Program offered by:*  
McLean Hospital  
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[www.mclean.harvard.edu](http://www.mclean.harvard.edu)  
800.333.0338

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## **About Our Program**

Welcome to The Hill Center for Women at McLean:  
DBT Solutions for Borderline Personality, Trauma, and Related Disorders

### ***Offering Both Partial and Residential Acute Care***

The Hill Center for Women at McLean offers psychiatric and psychological services for women with histories of trauma and related disorders, borderline personality disorder, mood disorders, and anxiety disorders.

Our staff are experts in applying dialectical behavior therapy (DBT) to the treatment of trauma. Intensive dialectical behavior therapy (DBT) helps women to overcome self-destructive, impulsive behavior and to regulate their emotions. We emphasize empathy, compassion, collaboration and empowerment to help women build new strength and find new resources to regain command of their lives.

The group-based treatment program is designed for women who need more structure and intensive treatment than can be received from an outpatient program. Additionally, the program serves as an adjunct to individual therapy or as a support during transition from inpatient hospitalization. The program offers both short-term residential and partial hospital levels of care.

### ***Who We Serve***

Women from throughout the United States, Canada, and other places in the world come to The Hill Center for treatment. We serve a wide range of women, in acute crisis or in otherwise destabilized situations, who are motivated to work hard in a therapeutic environment that employs dialectical behavior therapy (DBT) as the primary intervention.

We aim to provide a safe, supportive, and empathic environment that also challenges women to function at their highest capacity, encouraging empowerment with skills and knowledge, and ultimately increasing their autonomy and a sense of connection and meaning.

Although our program is for people in acute situations, those who come to The Hill Center have the ability and willingness to work with us collaboratively and to remain safe, sober, and medically stable while in treatment. This requirement supports the important therapeutic work undertaken by each person and ensures a living and working environment that feels safe to all of our clients. The individuals who do best and go through our treatment program successfully are those who can work collaboratively with others and meet our safety standards and policies.

Individuals with severe psychosis, severe eating disorders or those who are medically unstable will be served best by other McLean programs. Individuals with secondary substance abuse will be considered on an individual basis. We generally require a period of sobriety prior to admission.

## Frequently Asked Questions (FAQ's)

### **1. What is the length of the program?**

Clients stay, on average, two to three weeks. Slightly longer stays are sometimes possible if clinically indicated, depending on funding for such treatment. Clients may utilize either or both the partial and residential programs during an episode of treatment. Inpatient units are also available on grounds in the event a client requires a higher level of care.

### **2. How is a typical day structured?**

Our partial hospital program runs Monday through Friday. Groups begin at 9 am and end at 2pm. Clients can expect bi-weekly meetings with their case managers and meetings with psychiatric or nursing staff as needed. These individual meetings may happen during or after group time. Some clients may receive additional specialized individualized meetings, as needed for particular clinical problems.

Clients in the residential program attend all of the above components of treatment alongside our day clients, and they also weekend groups from 9 am to 12 pm and evening groups. Those in residence have access to staff 24 hours a day. Residents cook and eat meals together and participate in chores at the house, fostering a sense of community and reinforcing the importance of self-care and independent functioning.

During free hours, clients are encouraged to resume normal life activities outside the confines of the program. This gives them an opportunity to increase positive experiences, practice their skills, and re-connect with important parts of their lives. Clients often socialize informally with each other or visit with family members outside of scheduled programming. They are also welcome to attend any relevant self-help groups on campus that are open to the community.

### **3. Will I have a Case Manager at the Program?**

Yes. Everyone who comes into the program will be assigned a Case Manager who you will meet with one to two times per week for 30 minutes to discuss treatment planning, goals setting, skill building and aftercare planning. Your case manager will also be a liaison to your outpatient treatment team and your family if clinically indicated.

### **4. Will I meet with a Psychiatrist?**

Yes. A member of the psychopharmacology team will meet with you to assess, evaluate and prescribe medication. This person will also work with your outpatient prescriber to determine the most effective medication plan for you.

**5. Will my family be involved in my treatment?**

We support families and couples in our treatment. Family and couples meetings are quite important for those who have conflicts in or who are feeling inadequately supported by those relationships. We hold these meetings as indicated and respect clients' wishes around any involvement, while also emphasizing the importance of open communication, psychoeducation and intervention with families.

**6. Can I hold my own medication?**

Patients will eventually be expected to manage their own medication. Initially, The Hill Center staff will secure medications in a designated medication room and will supervise administration of the medications according to the prescribed regimen.

**7. Are meals included?**

*Day/Partial Clients:* Meals are not included for Day/ Partial clients. However, there is a break for lunch between 12-1pm daily. We encourage you to bring your lunch or go to the cafeteria and enjoy dining with other members of the community during that time.

*Residential Clients:* All food is provided for those clients staying in the residence. Breakfast and lunch are prepared on your own. Clients will be expected to prepare dinner on a rotating basis. Meal planning, cooking, and clean up responsibilities will be shared by residents on a rotating basis. Availability of arranging special diets other than vegetarian or lactose intolerant may be limited. Those residents requiring more specialized meal plans will be responsible for providing their own food at an additional expense.

**8. What can/should I bring?**

- 2 week supply of prescription medication
- Over the counter medicine/supplies: Pepto, Tylenol, Benadryl, etc.
- Laundry bag and detergent (washer/dryer on site)
- Alarm clock (if there isn't an alarm on your mobile phone)
- Pillow/linens/towels (Ours are standard hospital linens, so if you would be more comfortable with your own, you can bring them.)
- Folder or binder to organize your materials
- Money for transportation, entertainment, medication, etc.
- Laptop computer (If you have one, we have wireless internet)

### **Your Treatment Team**

Our leadership and staff are comprised of dedicated, compassionate and creative clinicians who have been highly trained in the areas of trauma and DBT. Many of our staff have attended DBT intensive training and have extensive experience running DBT groups. Several of our staff have received additional training and have many years' experience working with specific clinical problems, including dissociative disorders, eating disorders and substance abuse.

At The Hill Center, women receive comprehensive treatment from a multidisciplinary staff. We have staff from diverse disciplines and backgrounds, including psychiatrists, psychologists, nurses, social workers, art therapists and mental health counselors.

### **Group Guidelines**

The primary purpose of the following guidelines is to ensure a safe and psychotherapeutically effective environment for each patient's group therapy experience. Our goal is to help patients to express themselves effectively and feel adequately understood while strengthening their connections to the larger community at The Hill Center.

- Please respect the confidentiality of other patients. Each patient and group leader is expected to keep everything shared within the group confidential. Material discussed in groups should not be talked about outside of the treatment setting.
- All groups will begin and end on time. Out of respect for the other group members and the group leaders, individuals will not be allowed to enter any groups more than five minutes late.
- Attendance to groups is a vital part of treatment. Any absences that are planned must be communicated to staff ahead of time by each patient. Continued absence and lateness may be grounds for dismissal from the program.
- Please make your best effort to remain in group until it ends. If you must leave, please inform the group of your reasons and your plan to keep yourself safe if relevant. Once you leave group you will not be allowed to return to the group.
- Please do not talk about past trauma or past episodes of suicide attempts or self-harm. Do your best to talk about your feelings, reactions to, and impact of an experience rather than details and specifics that may be upsetting to other members.
- Please make your best effort to remain psychologically present during groups and to ground yourself in a way that is not distracting to other members.
- Cell phones and pagers are not allowed in groups.
- Medications and food are not to be consumed in groups.

## Group Descriptions

**ORIENTATION:** This group is held twice a week and is designed to help clients obtain a better understanding of the program. It's an opportunity for new clients to ask questions about the program and to connect with other new members of the community.

**SELF-ASSESSMENT/GOALS:** Clients attend Goals Group on Monday to review written, attainable goals with one another for the upcoming week. On Friday mornings, progress toward goals is reviewed and goals for the weekend are discussed. Clients are encouraged to exchange observations and suggestions with one another.

**DIALECTICAL BEHAVIOR THERAPY SKILLS GROUPS:** DBT Skills groups are organized around the four DBT modules: Mindfulness (increasing awareness) Interpersonal Effectiveness, Emotion Regulation, and Distress Tolerance. DBT Skills are also integrated throughout the group program.

**SAFETY WORKSHOP:** This group supports clients in creating individualized safety plans. The format asks that clients work on identifying events, thoughts, and feelings at different levels of distress and then identify strategies for coping that relate to each level of distress. Strategies draw on DBT and other skills taught throughout the program.

**LIFE BEYOND TREATMENT:** This provides an interactive setting to help clients identify and gain skills as they work toward an effective balance between treatment and their lives. Clients who attend can be at very different points along the continuum of "building a life worth living." The group works together to consider manageable, attainable next steps to creating healthier relationships, adding more fun and "get out of your head" kinds of activities, and balancing work, family and time for oneself.

**PTSD SKILLS:** This group provides a didactic and interactive structure to teach skills that help challenge post-traumatic stress symptoms, working to increase knowledge and practice of grounding, pacing, and skills to better notice triggers that increase symptomatic behaviors.

**SELF-IN-RELATION GROUP:** This twice-weekly psychotherapy group is based on the Self-in-Relation model. Topics are generated by the members and can include: the importance of relationships in our lives, building healthy connections, managing disconnections and conflict, the vicious cycle of shame and disconnection, and surviving violations and betrayals.

**EDUCATIONAL and VOCATIONAL ISSUES GROUP:** This group provides clients with a forum for both discussing their feelings and problem solving previous and/or current job and educational experiences. The group works together to identify manageable steps to be taken and provide support in exploring future plans in these arenas.

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***NUTS and BOLTS:*** This group has a workshop format offering a place for clients to focus on a specific task they have been avoiding and/or overwhelmed by. Tasks range from paying bills, budgeting, time management, doing pros/cons lists about a difficult decision or task, working on safety plans and making aftercare related phone calls. There is an initial check in for identifying task, time to work on that task with staff support, and a brief wrap-up to acknowledge successes.

***ART THERAPY:*** This group utilizes the creative process with collage, drawing and/ or clay, as a means to both represent the individual's experience as well as offering an opportunity to problem solve and reflect on specific issues. A theme is offered from which clients can choose to work. The group comes together for the last 20 minutes to share each person's process briefly. The most important guideline for this group is that people are asked to "check your (art) critic at the door."

***PTSD/SUBSTANCE ABUSE:*** This group explores the ways in which PTSD symptoms lead to the use and/or abuse of substances. The group facilitates conversations designed to help clients better manage urges that have previously led to substance abuse. Emphasizing the group's supportive role in recovery, clients both seek and offer feedback under the guidance of group leaders. Participants need not fully believe they have a substance abuse problem in order to participate meaningfully in the discussion. Not limited to any particular healing philosophy, the group works to identify and foster individual strategies to help participants maintain sobriety.

***COMMUNITY BREAKFAST:*** While this is not a billed group, we encourage clients to come together one morning a week to socialize. Informal socializing can be very anxiety producing but is an opportunity to practice in a structured setting.

***COMMUNITY MEETING:*** This is an opportunity for all clients to discuss issues affecting the community and to make or hear announcements for the center. Any difficulties with adherence to the safety or respect policies are discussed here to help the individual and the community get back on track and make any necessary repairs.

***IMPULSE CONTROL:*** This group teaches clients to identify red flags in areas of thought, feelings, and body sensations that can lead to impulsive behaviors. Choice points are discussed and skill options are explored. It is hoped that building a repertoire of skills can alleviate powerlessness.

***DEALING with DISSOCIATION (DWD):*** Weekly group for clients diagnosed with DID (Dissociative Identity Disorder). Patients share their ways of coping with dissociative symptoms and their feelings about having the diagnosis. Attendance of this group is by referral only; please check with your case manager.

***EATING DISORDERS:*** This group will provide a structured and safe environment to work on food related issues, anorectic and bulimic behaviors. The group also works on skills that help better manage impulsivity and increase individuals' awareness of eating patterns, body, self-image, and distortions, the goal being to increase independence and control.

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**ANGER MANAGEMENT:** A curriculum that provides psycho-ed which includes the functions of anger, the interpersonal costs of anger, the benefits of experiencing anger, assertiveness training, and ways to improve one's relationship with anger.

**SELF ASSESSMENT WITH ART:** A self assessment tool to identify thoughts, feelings, and body sensations using art as a medium for self expression.

**Evening and Weekend Groups**  
(Mandatory for all residential clients)

**RESIDENT'S MEETING:** This group focuses on practical items that are specific to residential living, such as community chores that involve preparing dinner and maintaining community areas. All Residents are expected to participate in the meeting, as well as chores, to balance therapy and treatment with activities of daily living and to contribute to the residential community.

**MENU PLANNING:** This group structures and organizes dinner menus and supplies for the following week. Dinner recipes are provided and clients identify the necessary ingredients for the grocery list, labeling the items in stock. At the end of the group, clients identify their evening plans. Even if you are proficient at cooking, we ask that all residents attend to support each other in planning and organizing cooking for a large group.

**EVENING PLANNING:** This group offers an opportunity to self assess, review skills utilized throughout the day and identify plans for unstructured time in the evening. Clients may plan for the evening independently or as a community.

**EXPRESSIVE WRITING GROUP:** This group is designed to offer clients an alternative means of expression through structured writing themes and exercises. The group both introduces writing as an expressive medium to novices as well as encouraging more experienced writers to explore different topics and ways to utilize the medium.

**OPEN ART STUDIO:** This group provides an opportunity to use arts and crafts to practice DBT skills, such as distraction, mindfulness and improving the moment. Clients are encouraged to try a new activity or to bring in a project they have already started, such as knitting, collage, sketching, card making, etc.

**KITCHEN ORGANIZATION:** The purpose of this group is to clean the cabinets and refrigerators to prepare for the incoming grocery order. This removes community food and leftovers, such as yogurt, deli meat and cheese, other dairy, old produce and bread and contributes to keeping community storage areas clean.

**GOALS WRITING:** The focus of this group is to outline treatment goals for the following week, such as specific agendas in specific groups, tasks related to improving health (ie. Sleep hygiene, increasing water intake, etc.) and aftercare planning.

**SELF ASSESSMENT:** The function of this group is to learn the purpose and benefits of self assessment and tools with which to do it. Clients are also asked to provide their plans for the day and can use this group as an opportunity to make plans together.

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***HOMEWORK GROUP:*** A self-directed opportunity to work on a variety of items; safety plans, DBT worksheets, journaling, self-assessment skills, diary cards, schoolwork, work-related work, therapy homework, studying DBT modules, creating schedules/structure plans, organizing program materials, etc.

***LIFE TASKS:*** A community-focused activity involving organizing and labeling newly delivered groceries and conducting a cleanup of the first floor. The purpose is both practical and therapeutic, as the program assists clients in resuming daily living skills.

### **Respect Policy**

- Communicate respectfully with each other and staff, valuing the other person's point of view.
- Be respectful of each other's confidentiality within the program. Avoid gossip.
- Individual privacy and space are an important part of living and working together. It is necessary for each of us to ask before touching or hugging.
- We acknowledge the importance of connection and friendship in healing, but we expect that you will not engage in an exclusive or romantic relationship while in treatment.
- Clients' belongings are to be respected and only borrowed or used with explicit permission.
- No stealing.

### **Safety Policy**

- Each person is responsible for her own safety in the program. If you are feeling unsafe, it is expected that you will seek out a STAFF member to talk about these concerns. It is NOT appropriate to share these issues with other clients.
- Engaging in unsafe behaviors includes anything that is harmful to yourself or the safety of others. This includes, for example, suicidal behavior, aggressive behavior, etc.
- No alcohol or drug use while attending the program.
- Please bring any safety issues to the staff before they become unsafe behaviors, to help you find ways to handle these concerns for your safety and your treatment. This includes bringing any concerns you have about the safety of other clients.
- No secrets. If a client engages in some problematic behavior it is expected that you will immediately share this information with staff. It may become an issue for community discussion.

### Guidelines for Residential Living

Living together poses some unique challenges and rewards. Here are some guidelines that address common problems that may arise:

- Please schedule visits so they do not interfere with your treatment program; i.e., groups and/or appointments. Visitors are asked to visit in the common area and are **not allowed upstairs**.
- We are not an inpatient facility, so generally you are free to come and go as you wish. However, we ask that you inform us of your time of departure, your destination, and your expected time of return. There is a board located next to the main entrance which you should use to sign in and out on. The door at The Hill Center is locked at 10:00 p.m. for security purposes but can be opened from the inside. Curfew time is 10:00 p.m. Sunday through Thursday and 12:00 a.m. Friday and Saturday. Staff will conduct room checks twice each night for safety reasons. They will do their best to minimize any disturbance/disruption to sleep.
- We don't provide each client with her own phone, so be mindful of when you receive calls and how long you are on the phone. The client phone number is: 617-855-2871. The staff office phone number is: 617-855-2535.
- Work at The Hill Center can be difficult and tiring. Eating and sleeping well will be important everyday goals to maintain. Residents are uniquely able to work together and support each other in these areas. We recommend, "quiet time" in the evening to begin around 10:00 p.m. (or earlier) so that the evening hours are relaxing.
- Please remember to be respectful of the building and the grounds.
- Please do not bring any food/drink upstairs into the residential rooms.
- Valuables should be locked in your drawer. A key will be provided to each client.
- Clean your room on a regular basis, at least once a week is advised. Ask staff for cleaning materials, they will gladly oblige.
- Part of the fun and the work of living together includes meals, outings, and community events. Try as much as possible to participate in planning and preparing for meals, weekend outings, and in-house activities. You will be expected to do your share of the housekeeping chores and meal preparations.

### **Substance and Alcohol Policy**

- The Hill Center is an alcohol and substance free environment.
- No alcohol or drug use is allowed while attending the program.
- Residents with recent history of active substance and alcohol abuse or dependence will be expected to attend self-help groups at a frequency to be determined in collaboration between the patient and their treatment team.
- Residents with recent history of active substance and alcohol abuse or dependence will be subject to both regular and random toxicology screens.
- All residents will be subject to breathalyzer when returning from off of the program premises. Toxicology screens may also be administered to monitor compliance with The Hill Center's substance free policies.

## Issues of Safety

As a member of a community, each client carries the responsibility for maintaining her own safety and for contributing to the safety of the community. The staff of The Hill Center is committed to ensuring that the **environment** is safe and therapeutic for all participants. If you struggle with self-destructive impulses, it is imperative that you speak with a member of your treatment team **before** you act on the impulse. Remember, even in these most difficult moments, we want to work with you. If you choose not to speak with a member of your treatment team and engage in self-destructive behaviors, your Case Manager and/or team will meet with you individually to discuss the impact of this behavior on your treatment and on the community. The team will weigh the seriousness of action. Please keep in mind that carrying out any of the behaviors listed below may necessitate clinical responses including referral to inpatient level of care, warning, suspension, or discharge.

Examples of self-destructive behaviors:

- Self injuring
- Attempted suicide
- Overnight guests
- Sexual activity on the premise or with other clients active in the program
- Use of drugs/alcohol while in treatment (in or outside of the Program).
- Stealing
- Mismanagement of medications
- Fire setting or other damage to hospital property
- Refusing to collaborate with the treatment team on your individualized plan
- Any behavior that seriously and adversely affects the community

**Note:** Should you have complaints about the staff or your treatment, you are encouraged to bring them up directly with your Case Manager and with your team.

## Infection Control Guidelines

There are a few simple guidelines that will help to prevent the spread of infection while you are a client here. These guidelines are in place to protect you, as well as those you come in contact with during your stay.

Simple precautions are needed to avoid exposures to blood and other body fluids which may contain germs – these other body fluids are things like saliva, urine, feces and vomit.

Please read the following, and, if you have any questions, please speak to a member of the staff.

1. You should wash your hands thoroughly after using the toilet, touching wounds, blowing your nose, after smoking and before eating or handling food.
2. You should use only your own forks, knives, spoons, straws, cups and plates, and avoid sharing food or drinks with someone else. Any food that you have handled or partly eaten should be thrown away in a trash container.
3. Personal items like makeup, earrings, razors, nail clippers and clothing should not be shared.
4. Personal hygiene items such as toothbrush, soap, brush/comb, mouthwash are kept in your room – do not leave them in the bathroom where others might use them. Do not share them.
5. Smoking is limited to approved areas. If you smoke, throw your butts in the ashtrays. Do not puff on anyone else's cigarettes or let anyone puff on yours.
6. If your clothes become soiled with blood or other body fluids, they may be washed in the washer/dryer in your residence. Be sure to use a hot wash cycle. Ask staff if you need help. If your linens (sheets, blankets, towels, etc.) become soiled with blood/body fluids, tell the staff. All other used linen should be placed in your regular laundry bags. If you notice dirty or soiled areas in the residence, please let staff know. Remember that these guidelines are to protect you, other clients, and staff. Feel free to discuss questions or concerns with the staff.

## **Fire Safety**

All clients will review the fire regulations and take a Self-Preservation Test when they enter the program. Clients should never become involved in putting out a fire, no matter how small.

### **In Case of Fire:**

- At The Hill Center, if you discover a fire, tell a staff person, and she/he will pull the fire alarm. Then evacuate the building as practiced during fire alarms.

### **Evacuation Sites:**

- At The Hill Center, clients evacuate as listed below based on location of alarm. All clients and staff must remain together outside until an “all clear” signal is given from security.
- When the alarm sounds, all clients must leave their rooms, activity, etc. immediately and then evacuate the building. Clients should go to the appropriate evacuation site.
- Anyone who refuses to comply with fire regulations, disables a smoke detector or hinders an evacuation will be considered for possible discharge.
- It is critical for all clients to be aware of safety practices. This includes safely disposing of cigarettes as well as maintaining care in the kitchen. Pots should never be left unattended on the stove; exhaust fans should be used while cooking; the stove should be kept clean. Staff will gladly instruct clients on the use of the microwave.

### **Main Exit Points at The Hill Center:**

Fire Exit plans are posted at all levels of The Hill Center. Plans are posted in Areas #01, #100, #200 and #300.

Also, please note 2 exits are provided from each bedroom on the 2<sup>nd</sup> and 3<sup>rd</sup> floors. The doors located between bedrooms should remain active, unlocked and unblocked.

- Emergency egress door between bedroom areas #207 and #206
- Emergency egress door between bedroom areas #206 and #205
- Emergency egress door between bedroom areas #205 and #204
- Emergency egress doors between bedroom areas #204 and corridors
- Emergency egress door between bedroom areas #309 and #307
- Emergency egress door between bedroom areas #307 and #306
- Emergency egress door between bedroom areas #306 and corridors

Clients need to allow free secondary passage from all bedrooms listed above.

### **Client Protection of Rights**

All clients have the right to:

- Considerate and respectful care that respects the client's personal value and belief systems
- Informed participation in the decisions regarding their care
- Participation in the consideration of ethical issues that arise in the provision of their care
- Personal privacy and confidentiality of information
- Make complaints concerning the quality of their program/treatment without fear of penalty/termination

In addition, you have particular rights and privileges as a client of McLean Hospital. These rights and privileges are described in the booklet, "A Guide to the Rights of McLean Hospital Patients" given to you at the time of your attachment to The Hill Center.

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**Mailing Address and Phone Numbers**

The mailing address at The Hill Center is:

(Your Name)  
The Hill Center  
McLean Hospital  
Mail Stop 238  
115 Mill Street  
Belmont, MA 02478

The client phone number is: 617.855.2871  
The staff office phone number is: 617.855.2535  
McLean Hospital's main number: 617.855.2000