



Reduce Waiting & No-Shows • Increase Admissions & Continuation

Creating a Welcoming Environment

Perinatal Treatment Services

Abstract

Specializing in treatment services for pregnant women and mothers with addictions, Perinatal Treatment Services mission is strongly tied to showing respect and support for the women who come to them for treatment. However, the first impression the agency created for incoming clients did not effectively reflect this mission. In an effort to align their environment with their mission, PTS worked to make some fundamental changes that have resulted in tremendous improvements for clients, yet were accomplished for little cost to the agency.

Aim:

Increase Treatment Continuation Rates

Promising Practice:

Therapeutic engagement:

Create a positive environment within the agency by welcoming first and processing later

Keywords:

Executive Sponsor, involving clients, conducting a walk-through





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Sara, a twenty-five year old woman, had a three-year-old daughter and was four months pregnant. She also has an addiction to methamphetamine. Sara wanted to be the best mom she could for her daughter, and she wanted her new baby to be born healthy, so she decided to get help. But when Sara first walked into the addiction treatment agency, she immediately felt uncomfortable. The reception area looked like it could have been part of a jail at one time. Sara's intake took place in the reception area, as other people were coming and going through the room. As she quietly answered personal questions in the public lobby, Sara constantly struggled to keep her three-year-old daughter occupied. Right away, Sara regretted her decision to come in for an assessment.

No agency wants clients to be uncomfortable or face such challenges when they make the difficult step and seek treatment. It does happen though, and it was a problem at Perinatal Treatment Services (PTS) in Seattle, Washington. Since the agency decided to take on improving client care, a number of important changes have been made that improve clients' first experiences at PTS and keep clients engaged in treatment.

Agency Services

Perinatal Treatment Services (PTS) began as a research project in 1989. The outcome of the research showed that pregnant women with addictions had babies with higher birth weights if they received treatment at any time during the pregnancy. After the five-year research project concluded, Perinatal Treatment Services was established as a private, non-profit organization, and they expanded their scope of treatment to women with children ages six and under, as well as pregnant women. PTS has two sites, one in Seattle and another in Tacoma, Washington. Approximately 175 women are served annually by the agency. The majority of women enter a residential treatment program that lasts for six months, and residential treatment is followed by eighteen months of outpatient services. Recently, PTS began treating an increased number of methamphetamine and oxycotin addictions.

The Impetus for Change

PTS's <u>Executive Sponsor</u>, Kay Seim, initiated discussions with management and staff regarding ways to show increased respect for the women coming to them for treatment. The staff at PTS did a <u>walk-through</u> of their intake process from the perspective of a new client, and what they discovered through this process provided the staff the guidance and motivation for making client-centered changes.

To help focus on their <u>clients' perspectives</u>, the staff at PTS began taking note of clients' comments about the physical environment in the reception area. A number of clients' first impressions were that the reception area looked "institutional," and felt "similar to jail." In addition, experiences of clients like Sara, who struggled to keep her young daughter occupied while her intake session was conducted in the busy reception area, led to PTS's decision to remodel the reception area to make it feel more welcoming to clients and their children.





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Improvements Made

As a part of the remodeling, Kay sought out an artist to paint a mural of mother and baby animals in the reception area. Since this one change has been implemented, clients no longer perceive the reception area as "institutional," but as welcoming and comforting. Clients, their children, and agency staff have greeted this new mural with great enthusiasm.

To address the problems involved with conducting intakes within the reception area, office space has been rearranged so that the women go through the admissions process in a private, confidential space now. A childcare room has been created next to the admissions office, and a childcare worker now plays with children in this room while the mothers are being admitted for treatment. In addition, PTS has also begun providing food and drinks for clients waiting in the reception area.

Monetary Cost

PTS faced budget constraints while looking at the need for environmental improvements, but their focus remained on the goal of creating a more welcoming environment and making changes that would communicate a greater respect for the women coming in for treatment.

As Kay was seeking an artist to paint the reception area's mural, she expected to spend about one thousand dollars to have it done. She spoke about this idea with a number of people, including the obstetrician who delivers the babies of women in treatment at PTS. Excited about the prospect of helping to transform the appearance of the waiting area, the doctor wrote a personal check to have the mural painted.

Other changes have also come without significant monetary expense. Some of the environmental changes were accomplished through rearranging space and shifting staff time to different tasks during this process.

Responses to the Improvements

Recently, PTS held a focus group with clients to gauge their reactions to the recent environmental changes, and the results were very good. Kay described both client and staff responses to the changes as being "very positive," and the overall morale of clients and staff appears better now than prior to the changes.

The reception area is now a place where the mothers coming in for treatment with their children can be more relaxed, and they enjoy looking at the painting of the animals with their children. Everyone involved in the changes has appreciated the agency's provision of a private space for intakes as well as the agency's offering of childcare services during the client intake process.





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Lessons Learned

While Sara is now in a PTS treatment program, learning from her experience helped staff make the changes necessary to ensure that when other women make the brave step to come to PTS for help, they are treated with respect and feel as welcome and comfortable as possible.

PTS has made some rather remarkable progress over the last year. As the organization looks back on the changes made, Kay expressed that the act of moving forward was accomplished by taking bold steps and forging ahead. She now feels more strongly than ever that you never know what the answer will be unless you ask. Says Kay, "You have to set a goal and 'just go for it."

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