



YALE-NEW HAVEN HOSPITAL

Located on the Connecticut shore, **Yale-New Haven Hospital** is a 944-bed tertiary care facility recognized as one of “America’s Best Hospitals” by *U.S. News & World Report*. Boasting a longstanding affiliation with Yale University Schools of Nursing and Medicine, an international reputation for leading-edge research and advanced care, and extensive, state-of-the-art facilities, Yale-New Haven Hospital is proud to offer nursing professionals a wide range of choices — from opportunities for the moment to careers for life.

New Haven, Connecticut
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Yale-New Haven Psychiatric Hospital Dual Diagnosis Service

INPATIENT PROGRAM

The Dual Diagnosis Service at Yale-New Haven Psychiatric Hospital provides brief hospitalization for adults suffering from severe psychiatric disorders compounded by addictive behaviors. Treatment is short-term (1-20 days), and addresses episodes of suicidality, homicidality or any grave disability that causes patients to become unable to care for themselves. This level of care targets the following areas:

- **Safe management of suicidality or homicidality in the context of patients’ psychiatric conditions**
- **Medication treatment of psychiatric and substance abuse problems, including alcohol and drug detoxification**
- **Careful assessment of patients’ psychiatric and substance abuse problems, as well as psychoeducation to help them understand factors leading to their hospitalization**
- **Enhancement of patients’ commitment to change problematic behaviors and participate in discharge plans that take into account their clinical, medical and psychosocial needs**

DUAL DIAGNOSIS PARTIAL HOSPITAL PROGRAM (DDPHP)

The DDPHP is the most intensive level of ambulatory clinical care, in which patients are in treatment for four or more hours per day for up to 5 days per week. Patients are eligible for this level of care when their day-to-day stability is threatened by severe psychiatric and substance abuse problems. Clinical status and the patient’s treatment progress dictate their length of stay, typically ranging from 3-6 weeks until symptom severity has lessened. The DDPHP focuses on the following areas:

- **Development of relapse prevention and coping skills that reduce or resolve patients’ most acute psychiatric and substance abuse symptoms**
- **Promotion of medication and treatment compliance**

- **Identification of patients’ interpersonal problems contributing to a higher relapse risk and improvement in these problem areas over time**
- **Enhancement of patients’ commitment to follow-up with their discharge plan**

DUAL DIAGNOSIS INTENSIVE OUTPATIENT PROGRAM (DDIOP)

Once treatment goals have been reached in the DDPHP and/or patients do not evidence the severe symptoms found among DDPHP patients, the DDIOP is available. These patients have significant dual diagnosis relapse risk, and continue to deal with psychiatric and addiction problems. However, they attend the program less than 4 hours per day and typically less than 5 days per week. The DDIOP focuses on:

- **Maintenance of all areas targeted in the DDPHP**
- **Continued development of relapse prevention and interpersonal skills**
- **Management of dual diagnosis problems on an ambulatory basis with decreasing professional contact over the course of several weeks, until patients do not require this level of care**

EVENING PROGRAM FOR CHEMICALLY ADDICTED PERSONS (EPCAP)

This program primarily focuses on the treatment of substance abuse and dependence, though patients in the program often have comorbid psychiatric conditions. This program operates Monday, Wednesday and Thursday from 5:30pm-9:30pm, targeting the following:

- **Abstinence initiation and psychoeducation about addiction**
- **Development of relapse prevention skills**
- **Utilization of community-based, recovery-related support systems**
- **Increasing knowledge of family issues impacting patients’ recovery efforts**