

Oral presentation

Open Access

## **STEP: a continuum of service delivery for person living with a dual diagnosis**

Katherine Moxness

Address: Lisette-Dupras and West Montreal Readaptation Centers, 8000 Notre-Dame Street, Montreal Quebec H8R 1H2, Canada  
from WPA Thematic Conference. Coercive Treatment in Psychiatry: A Comprehensive Review  
Dresden, Germany. 6–8 June 2007

Published: 19 December 2007

BMC Psychiatry 2007, 7(Suppl 1):S40 doi:10.1186/1471-244X-7-S1-S40

This abstract is available from: <http://www.biomedcentral.com/1471-244X/7/S1/S40>

© 2007 Moxness; licensee BioMed Central Ltd.

The West Montreal Readaptation Center and the Centre de réadaptation Lisette-Dupras are service providers for over 4,000 persons with mental retardation and/or pervasive developmental disorders. Persons live either with their families or with a variety of care providers in the community. Approximately ten percent of these persons present extreme challenging behavior and are multiply diagnosed. Traditional psychiatric and 911 services are not satisfactory forms of intervention with those persons presenting extreme challenging behavior or in crisis situations. In order to ensure and to maintain successful community integration of persons living with extreme challenging behavior and dual diagnosis, the Centers developed the Specialized, Treatment, Evaluation and Prevention program (STEP). This prevention program for service delivery has inspired the development of the best practices in other similar readaptation centers throughout the province of Quebec. This presentation will define the core components of the STEP service delivery model. Risk management tools and protocols used to prevent and manage risk and to reduce the use of coercive treatment will also be described. Moreover, a description of the newly created 'clinic-legal' committee to support managers and clinical staff in the difficult decision making processes when supporting persons who are a risk to themselves, others and the establishments will be described. Case examples will be utilized to illustrate the clinical approach of STEP and to demonstrate the application of the STEP model. Results achieved (reduction in the use of coercive treatments, reduction in the number of psychiatric hospitalizations, the successful de-institutionalization process of over 300 persons with challenging behaviors, etc.) in the delivery of STEP services will also be presented.