**Foundations Counseling Center: Past and Present**

Cristie and I opened Foundations Counseling Center in 2004 after we both saw a need for non- traditional mental health services outside the office setting. Many of the clients we were working with could not get mental health appointments at outpatient clinics in the area for 6-12 months. During this time, symptoms would worsen and some of our clients would unfortunately be hospitalized. We also saw additional mental health barriers for clients with Medical Assistance and underserved populations. Cristie and I wanted to be able to provide accessible, preventative, effective mental health services to all clients in a real time, home- based setting. We started providing these services through the Intensive In-Home Program for Children with Medical Assistance. In- Home Therapy allowed us to see the person in their environment where they were often most comfortable and it allowed work to be done with the entire family. It was also beneficial for clients who did not have reliable transportation, lived in rural areas with limited access to mental health services and resources or had medical issues that prevented them from receiving services in an office setting. During this time, we encountered obstacles with many insurance companies who were not willing to cover these services, but our commitment to providing these services continued. By tracking outcome measures of our clients, we were able to demonstrate that CAFAS (Child and Adolescent Functional Assessment Scale) severity scales decreased for 98% of our clients, they were able to get preventative help sooner, and 99% of the children we worked with were able to stay in the home setting without further out of home placements or hospitalizations. As the need for this type of non- traditional mental health service continued to grow, our in-home service and service areas also expanded. Eventually, more and more funding sources were willing to cover our services after seeing the mental health benefit to clients and the financial benefit of this service which significantly lowered out of home placement and hospitalization costs.

In 2011, I continued on as Owner/Director after Cristie had the opportunity to move to sunny Florida. Since 2011, Foundations’ services have expanded to meet the in-home mental health needs of seniors, clients with disabilities, clients with therapeutic mentoring needs, group therapy, and the addition of many evidenced based psychotherapy models. We have expanded our service areas and added CCS funding for In-Home Psychotherapy and Psychoeducation.

FCC continues to be committed to providing evidenced based treatment models like Trauma Focused Cognitive Behavioral Therapy (TF-CBT), Dialectical Behavior Therapy (DBT), Eye Movement Desensitization and reprocessing (EMDR), Child Parent Psychotherapy (CPP), and Infant Mental Health Services (IMH) for the Birth to 5 population. A number of our staff have also been trained in the Zero Suicide Prevention model. Foundations also offers parenting support with many of our therapists trained in Love and Logic and The Nurtured Heart Approach. In addition to these evidenced based practices, we also incorporate mindfulness meditation, deep breathing, journaling, Trauma Informed Yoga and many other researched and effective alternative therapies.

In 2018, Foundations opened state certified branch offices in Lodi and Beaver Dam. This gave clients and staff additional, accessible and confidential spaces within the counties we serve to provide treatment and group therapy in conjunction with therapy provided in the client’s home.

Over the last year, we updated all our treatment forms to be more trauma informed, LGBTQIA+ and culturally sensitive. Our therapists focus on the specific needs of each client. Treatment goals are client centered, strength based, and recovery oriented. Foundations Counseling Center therapists strive to develop cultural humility and inclusivity for all our clients. We are an LGBTQIA+ Friendly agency and have also been trained as a Dementia Friendly Agency. Our therapists are incorporating the ACE (Adverse Childhood Experience Questionnaire) and the PHQ-9 (Patient Health Questionnaire) screening tools into our assessments with adults along with the Columbia-Suicide severity rating scale (C-SSRS) and QPR for all clients who score high for suicidal ideation. A Safety Plan is also developed for these clients. For children, we are utilizing the TSSCA (The University of Minnesota’s Traumatic Stress Screen for Children and Adolescents). We hope these assessment tools and therapeutic approaches will further our trauma informed practices and continue to provide the best mental health services to our clients.

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