



## From Chapter 1 of Desert Wise's Operating Manual:

### Mission

Desert Wise's mission is to promote the psychological health of military-connected individuals, veterans, and individuals in high stakes occupations. Desert Wise seeks to set a new standard for mental healthcare by establishing a business-medical culture in which patients receive professional, dignified, outcome-driven treatment.

### Values

We therapists commonly talk to our patients about values and the importance of identifying and defining our core values. It is equally important that we identify and define our professional values – both as individual professionals and as agencies. You will find that Desert Wise's values span patient care, stewardship of our profession, our collegial relationships, and the environment in which we work. This list is not meant to be all inclusive regarding what is important to us, but it instead focuses on our most strongly held values and those that differentiate us from other agencies.

#### 1) **Dignity, Autonomy, and Agency**

- a. We believe in treating our colleagues, collaborators, and trainees with the upmost dignity and will not tolerate the oppression, subjugation, condescension, or maltreatment of any staff member or affiliate by any staff member or affiliate.
- b. We believe in treating our trainees like adults and merely frame their training status as a professional developmental stage. Therefore, all staff are expected to treat trainees with dignity and fairness.
- c. We do not believe in legalistic approaches to operating procedures and are flexible in our orientation to the demands of life. That is, we are unconcerned with the occasional tardy, mishap, or oversight, and we believe that each can be a valuable learning opportunity. When we do become concerned, however, is when deviations from standards and expectations become patterns, at which time we will have a private and dignified conversation with you. If these concerns are not

remedied after attempts at correction, you can expect that any termination will be conducted in a private and dignified manner.

- d. We believe that our patients are autonomous, agentic adults, and we do not believe in eroding or otherwise compromising their agency in the therapeutic process. We make every effort to be completely transparent, to protect our patients from harm, and to engage them as active participants in their treatment.

## 2) **Respect**

- a. We believe that all healthy interpersonal relationships have proper regard for the feelings, wishes, and rights of others. As such, we expect all staff members to respect one another's privacy, boundaries, and needs.
- b. We believe that while the "admiration" form of respect is indeed earned, the universal form of respect is a basic respect for one another's human rights.
- c. We believe that professionals from all disciplinary/credentialing backgrounds have an equal potential to be competent, highly intelligent contributors to the clinic. Inversely, we believe that professionals from all disciplinary/credentialing backgrounds have an equal potential to be incompetent, inadequate contributors to the clinic. In sum, we abhor credentialing- or degree-based pecking orders and will not tolerate them in our clinic.

## 3) **Integrity**

- a. We believe that healthy work environments are staffed by individuals with high integrity – individuals who are incorruptible in their adherence to their moral and ethical principles, as well as individuals who are consistent in their adherence to these principles – irrespective of the setting, context, or audience.
- b. We believe that the highest quality mental health clinics are staffed with individuals who evince moral courage – to include a willingness to have hard conversations, make tough decisions, and take the occasional bullet for their colleagues and patients.
- c. We believe that what we say about patients in case conference or other collegial settings should mirror what we do/would say directly to our patients. Our patients should never be surprised at our depiction of them if they were suddenly privy to how we talk to our colleague. We believe that providers are permitted to have unpleasant feelings toward a patient, but we equally believe that this should be an active and transparent discussion with the patient.

## 4) **Authenticity**

- a. We believe that staff honesty and authenticity is paramount. Connectedness, trust, and safety in interpersonal relationships hinges on authenticity. Who you are should not markedly change from one setting to the next.
- b. We also believe that the success of our treatment is contingent upon authenticity with our patients. Successful treatment requires trust and a strong therapeutic alliance, which requires authenticity in treatment. If a provider is unable to elicit internal authenticity for/towards a particular patient, this patient should be transferred to a different provider.

**5) Judgment**

- a. We believe that good judgment is fundamental to every aspect of our clinic and work. We each must demonstrate sound judgment to maintain the clinic environment, promote strong collegial relationships, and conduct good therapy. A pattern of poor judgment may be an irreconcilable obstacle to a relationship with our clinic.
- b. We believe that good judgment is required to effectively treat patients, prevent harm to patients, and protect the clinic.

**6) Self-Containment**

- a. While we believe that some degree of self-disclosure to colleagues can be beneficial to the clinic environment, understanding intra-individual reactions to patients, etc., we believe that it is the responsibility of all staff members to behave, speak, and share within appropriate professional boundaries. Staff members are individually responsible for their emotional expression and management thereof.
- b. We believe that effective therapists are self-contained in their emotional expression and affective reactions while in sessions with patients. We do not believe it is appropriate to cry, cavalierly express shock, or otherwise recklessly emote in ways that can harm or be misinterpreted by patients.

**7) Reciprocity and Cooperation**

- a. We believe that the healthiest interpersonal relationships are reciprocal and cooperative. Thus, we promote a clinic environment where staff assist and look out for one another and are mindful of excessively taking advantage of or capitalizing on the kindness and generosity of others. We promote boundary setting and encourage our staff to address inequality in relationships.
- b. We do not believe that a lack of intent absolves staff of their responsibilities in being participative professionals or in being egalitarian in their professional relationships.

**8) Accountability**

- a. We believe that personal and professional accountability are imperative and nonnegotiable. We expect staff to be honest in their interactions and dealings with one another, and we expect staff to be introspective in analyzing their role in various situations. We also expect staff to be aware of and working on their own defense mechanisms, which can serve as an important impediment to the expression of accountability.
- b. We believe that when we make mistakes, we are accountable to identify them, understand them, report them, and remedy them.
- c. We believe we are accountable to our patients. We are accountable for meaningfully showing up in sessions and actively pressing their treatment forward. We are accountable for being honest, prudent, and transparent in our dealings with them. We are accountable for answering to them when they are discontented or otherwise concerned. We do not believe in abusing our position of power, and therefore believe we are wholly accountable to our patients for every facet of their care.

## 9) **Safety**

- a. We believe that providers reach peak performance when they feel safe, which includes working in a supportive, healthy work environment that promotes collaboration, cooperation, and reciprocal support. Collegial interactions are critical to the health of a work environment and the perceived safety of individual staff members. Therefore, providers working in the clinic will strive to maintain healthy, supportive relationships and approach clinical and business operations with a cooperative mindset.
- b. We believe that patients are more likely to utilize and sustain services when they feel safe. In our experience, no-shows and treatment dropouts co-vary with a lacking sense of safety. Thus, patients must be confident that they are safe and protected in their treatment.
  - i. We believe that appropriate professional boundaries powerfully ensure a sense of safety in the therapeutic alliance. Thus, all providers are expected to set and maintain impenetrable boundaries consistent with industry standards.
- c. We believe it is the continuous job of all staff members to assess physical and facility safety risks and vulnerabilities, as well as collaboratively problem-solve solutions. We also believe that it is the job of all staff members to alert others to acute safety threats and to work collaboratively to secure the clinic and protect patients.
- d. We believe that healthy staff are committed to the safety of their colleagues and patients and will not engage in behavior that puts either at risk.

## 10) **Loyalty**

- a. We believe that a sense of safety in interpersonal relationships requires mutual loyalty. If you doubt the way your colleagues speak of you behind your back, you are unlikely to feel safe enough to meaningfully collaborate or fully participate in case conference, etc. We optimize our functioning and experience by ensuring that we are loyal to our clinic, mission, and one another.
- b. We believe that interpersonal relationships can be imperfect – but still loyal. That is, we do not believe individuals need to be completely on the same page to demonstrate loyalty to one another.
- c. We equally believe that we cannot be good therapists if we are not loyal to our patients. This can come in the form of protecting them, showing up for them, being willing to have hard conversations with them, etc.
- d. We believe that loyalty is demonstrated in myriad ways, to include adherence to many of our other values. For example, we can show loyalty to a relationship by being authentic, reciprocal, accountable, respectful, etc.

## 11) **Value-Added Treatment**

- a. We believe in being patient-centered, which requires striving to ensure that all patients feel that their mental health care is value-added, dignified, and individualized to their idiosyncratic needs and characteristics. Patients should have an active and valued voice in their treatment, the goals being pursued, and what does/doesn't work for them.

- b. We believe in holding ourselves to high standards of care. We believe in being active providers and do not endorse or support idle/indolent approaches to treatment.
- c. We believe in intentionality in homework assignments, such that they should relate directly to the current topic in a patient's treatment and should be perceived as beneficial by the patient. That is, we don't believe in giving homework just to give homework, as this can erode a patient's trust in the treatment process and reduce their treatment buy-in.
- d. We believe in engaging in continuous macro-level process and treatment improvement.
- e. Given our clinic's emphasis on PTSD treatment, we believe in creating a trauma-informed environment that is not detrimental or taxing to patients with PTSD.

#### **12) Advocacy**

- a. We believe we are well-postured to be macro-level advocates of our populations of interest. Foremost, we are committed to advocating for military/veteran populations through as many venues and mediums as possible.
- b. We believe in advocating for our individual patients and being guardians of their mental health, functioning, and overall well-being.
- c. We believe in being good stewards of our profession – to include being prudent about how we represent our profession, how our words and actions may reflect on treatment/stigma, and how our daily conduct influences others' perceptions of the stability and competency of mental health professionals.

#### **13) Learning**

- a. We believe that competent mental health care professionals strive for professional growth, personal growth, and lifelong learning. We believe in fostering an environment of learning through shared knowledge, authentic feedback, didactics, and other forums that promote the acquisition of knowledge.
- b. We believe in collaboratively compiling resources, articles, and other beneficial materials, which requires all staff members to contribute to our library of knowledge.
- c. We believe that we can learn from the mail carrier, the cleaning staff, the accountant, our patients, and each other. When we do not value the wisdom, life experience, and intellect of all individuals, we forgo a diversity and depth of knowledge.

#### **14) Laughter**

- a. We believe that humor is a requisite feature of good therapy, and we believe that our providers can enhance their therapeutic alliances through well-placed, well-timed humor. We also believe that humor makes the heavy work of therapy more sustainable for both the patient and provider.
- b. We believe that in our collegial interactions, humor is also paramount. Taking ourselves too seriously can lead to quick burnout and an erosion of our clinic's culture. If we don't laugh, we'll cry.