

DISTRICT HEALTH CARE SERVICES, LLC

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District Health Care Services in Collaboration with

Store House Dental Welcome You!

About Us

District Health Care Services LLC

District Health Care Services provides an array of services to include onsite medical examinations, medications, dental services, lab tests, Behavioral Health and referrals to other providers as needed.

Our Services include:

- Diagnostic/Assessment
- Medication/Somatic Treatment
- Counseling and Psychotherapy
- Community Support Services
- Referrals to community providers (benefits, housing, etc)
- Referrals to our on sight Primary Care, and Dental services
- Rehab Day Services

Store House Dental

Storehouse Dental provides on-site dental services to under-served populations of adults and children that have limited access to dental treatment. Basic and advanced services will be rendered with the objective of providing the highest quality of care and respect to all patients.

Contact Us At: Phone: 202 894-6811

Website: districthealthcareservices.com

Information

DC Department of Behavioral Health Phone: ACCESS Helpline at 1-888-793-4357.

National Suicide Prevention Lifeline (Lifeline of re 24/7, gratuito servicios en español, no es necesario hablar ingles si usted necesita ayuda) Hours: Available 24 hours. Languages: English, Spanish. 1-800-273-8255.

COVID Information:
coronavirus.dc.gov/

Wear a Mask!

Special Thanks To

CPT Dorsey, MPD, Mrs Davis
(Special Events Ward 8)

Total Care Family Coalition (<http://totalfamilycarecoalition.org>),

Voices For A Second Chance
(www.vscdc.org),

Blessed2begifted (Blessed2BeGifted Ministries),

APEX Pharmacy <http://www.apexcarepharmacy.com/>

It's Getting Better All The Time!
MHO (IGBATT.COM)

Stick to the Basics: Brush & Floss

The single best thing you can do to maintain a healthy mouth is continue to brush and floss regularly. Brush your teeth at least twice a day for two minutes and floss at least once a day. If you've been slacking off on taking care of your teeth over the past few weeks (or months), it's not too late to bounce back without causing permanent damage. "Cavities are not something that happen overnight. In this quarantine window it's unlikely that something developed during this time. Your body can tolerate a little lax in routine — just get back on the horse," explains Matt Nejad, a dentist in Beverly Hills, California.

1. Protect Your Toothbrush

Keeping your toothbrush clean is important for your keeping your teeth healthy. Be sure to brush at least twice a day for 2 minutes, and rinse it well each afterwards each time.

Store your toothbrush in an open area to allow the brush to dry. Bacteria love moist and dark areas, and can grow on your toothbrush if left in these conditions. Avoid storing your toothbrush on counters near the toilet, or try closing the lid before flushing, as aerosols are generated when flushing. Also, keep your floss and tongue cleaners covered.

The American Dental Association (ADA) recommends replacing your toothbrush every 3-4 months, or more often if the bristles become frayed. If you are recovering from an illness, including COVID-19, replace your toothbrush.

2. Don't Forget About Your Tongue!

Brushing your tongue is also important to help combat oral bacteria. Not to mention, it also helps to stop bad breath. Both tongue scrapers and toothbrushes can be used to remove bacterial plaque on your tongue, however, many studies have found tongue scrapers to be the most effective.

Something To Think About

Dr Conley & Mr. Vasallo Store House Dental/District Health

storehousedental.com

At one point in our lives all of us may experience an event or situation that causes us to feel sad or depressed. However, sadness or depression in response to an event or situation is different from clinical or major depression.

Depression is a serious illness, not a harmless part of life. It is a complex disorder with a variety of causes. It is never caused by just one thing. It may be the result of a mix of factors, including genetic, chemical, physical, and sociological. It is also influenced by behavior patterns learned in the family and by cognitive distortions or thoughts that we tell ourselves.

Depression affects millions of people in this country. It is always troubling, and for some people it can be disabling. Depression is more than just sadness or "the blues." It can have an impact on nearly every aspect of a person's life. People who suffer from depression may experience despair and worthlessness, and this can have an enormous impact on both personal and professional relationships.

Depression Is Pervasive

When a person suffers from depression, it can affect every part of his or her life, including one's physical body, one's behavior, thought processes, mood, ability to relate to others, and general lifestyle.

Symptoms of Depression

People who are diagnosed with clinical depression have a combination of symptoms from the following list:

- Feelings of hopelessness, even when there is reason to be hopeful
- Fatigue or low energy
- Much less interest or pleasure in most

regular activities.

- Low self-esteem
- Feeling worthless
- Excessive or inappropriate guilt
- Lessened ability to think or concentrate
- Indecisiveness
- Thinking distorted thoughts; having an unrealistic view of life
- Weight loss or gain without dieting
- Change in appetite
- Change in sleeping patterns
- Recurrent thoughts of death
- Suicidal thoughts
- A specific plan for committing suicide
- A suicide attempt
- Feelings of restlessness or being slowed down

When a person is suffering from depression, these symptoms cause significant distress or impairment in social, occupational, or other important areas of functioning. This means that the person's family and social relationships, as well as work life, are impaired.

When a person is suffering from depression, symptoms such as these are *not* the result of a chronic psychotic disorder, substance abuse, general medical condition, or bereavement.

Physical Causes

Many physicians believe that depression results from a chemical imbalance in the brain. They often prescribe antidepressant

medications, and many people find relief as a result. However, there is no reliable test to identify such a chemical imbalance. It is unknown whether life experiences cause mood changes, which create changes in brain chemistry, or whether it works in reverse.

Depression may be associated with physical events such as other diseases, physical trauma, and hormonal changes. A person who is depressed should always have a physical examination as part of the assessment process to determine the role of physical causes.

When Professional Treatment Is Needed

If you or someone you know is depressed and exhibits any of the following signs, it is extremely important to seek the assistance of a medical or mental health professional.

1. Thinking about death or suicide. This is always dangerous, and you should see a professional therapist immediately.
2. When symptoms of depression continue for a long time, you may need professional help. Acute responses to events are normal, but they should not last beyond a reasonable time.
3. Your ability to function is impaired by your depression. Seek help before your life situation deteriorates to a serious level.
4. You have become so isolated that you have no one with whom to check reality. Seek out someone to share your thoughts and feelings with.
5. Depressive symptoms have become severe.

In Closing

Depression is a sign of weakness. It means that there is a “Weakness” in your usual way of coping and thinking that is leading to behaviors that are not helpful to you. The fact is many of us are living with a variety of stressors that add to or trigger feelings of sadness or depression. Take a minute and think about some of the experiences that you have had in your life or are currently facing. Raising children alone, working more than one job, ongoing financial concerns, layoffs, family concerns, the list can go on and on. So give your self some credit for being able to withstand the situation that you are going through. Listen, even the best long distance marathon runner gets tired sometimes.

Depression and or feelings of sadness can also be reinforced by the negative thoughts and feelings that we allow to control our lives.

Think about this, if it were possible to carry a tape recorder around with you and to record your thoughts for a week, “What types of thoughts would be recorded on your tape recorder?” Would they include thoughts like “I can make it? or would they include thoughts such as: "your stupid," "you can't do that," "they don't like you," or "its not going to work out?"

Well, if these are the types of thoughts that we are mediating on, then there is no wonder that we feel hopeless, down and discouraged.

Negative thoughts can limit our lives and control our behaviors to such an extent that we are unable to focus on the potential and positive things that are happening around us.

Don't let negative thoughts overtake you.

IGBATTMHO& District Health Care Services

Positive physical health habits can help decrease your stress, lower your risk of disease, and increase your energy.

Here are tips for improving your physical health:

GET ACTIVE—How well your body functions affects your ability to accomplish your daily activities. Sedentary behavior—which usually means sitting or lying down while awake—has been linked to a shorter lifespan and a wide range of medical problems. Any time you get up and move, you’re improving your chances for good health. To increase your activity:

- Take the stairs instead of the elevator.
- Have “walking meetings” with colleagues.
- Walk on a treadmill while watching TV or using the computer.
- Set an alarm on your computer to go off every hour and prompt you to move around for a minute or two.
- Try walking as if you’re already late.

MAINTAIN YOUR BODY Your bones, muscles, and joints all work together to make your body an amazingly movable machine. Like any machine, your body can suffer some wear and tear. It needs regular care and maintenance to keep moving with ease. To keep your body healthier:

- Maintain a healthy weight.
- Engage in muscle strengthening activities.
- Aim for 150 minutes of moderate intensity activity each week.
- Wear comfortable, properly fitting shoes. O
- Eat a well-balanced diet.

EAT A HEALTHY DIET We make dozens of decisions every day. When it comes to deciding what to eat and feed our families, it can be a lot easier than you might think to make smart choices. A healthy eating plan not only limits unhealthy foods, but also includes a variety of healthy foods. Find out which foods to add to your diet and which to avoid.

To eat a healthier diet:

- Replace saturated fats, like butter or meat fat, with unsaturated fats, like vegetable oils.
- Cut back on sodium. Choose fresh foods and those that have no added salt or less than 5% of the Daily Value of sodium per serving.
- Choose more complex carbs, like wholegrain breads, cereals, starchy vegetables, and legumes.
- Cut added sugars. Pick food with little or no added sugar.
- Get more fiber. Switch to whole grains and eat more vegetables, beans, nuts, and seeds.

<https://www.nih.gov/sites/default/files/health-info/wellness-toolkits/physical-wellness-checklist.pdf>

Depending on where you live, symptoms and previous history you may choose to contact your local Crisis Team or 911. A crisis team consists of a group of mental health professionals who will once you call respond to you at your location. The crisis team can help navigate you through the mental health services in your area, triage symptoms, arrange a follow-up appointment and assist you in getting appropriate help. The Crisis team after assessing your situation can sometimes help to defray an inpatient hospital stay, encourage medication use and stabilize symptoms until a clinic provider can see your loved one. Sometimes however the crisis team may decide that an inpatient stay is needed. If they do, they will help to arrange transportation to the hospital. Yet, please know that even if the crisis team feels that your loved one should be admitted the Doctor at the hospital may not agree.

A crisis team can be an invaluable asset to you and your family, but there are times in which you may have to call the police as opposed to or before you call a crisis team. When deciding between calling the cops vs. calling a crisis team ask yourself, are there weapons involved? Is there actual violence or issues related to safety present? A crisis team is a team of mental health professionals, not police officers. Only police officers have the training and expertise to manage dangerous situations and to transport a person against their will to the hospital for an evaluation.

However, just because you call the police and request that they take your loved one to a hospital, there is no guarantee that they will. In general, the police take, removing a person from their home and escorting them to the hospital against their will very seriously. Especially if they arrive on the scene and do not see the signs that you saw, or your loved one appears fine.

Unfortunately, just because you feel that your loved one should be taken to the hospital because they are not taking their medications, the police may not feel the same way. Your loved one has a right to refuse their medications, to refuse to see their outpatient therapist or to get help. The question you have to ask your self is how are the signs/symptoms experienced by your loved one negatively impacting them and then be prepared to make a case.

If the police agree with you and take your loved one to the hospital, please know that they will handcuff your loved one. I point this out because many people become nervous when this happens. Handcuffing is a safety precaution for both your loved one and the police; it does not mean that they are under arrest. If your loved one was escorted to the hospital by the police or with the support of the Crisis Team, it does not mean that they will remain at the hospital.

It just says that they will be seen by a Doctor who will decide if admission is warranted. Once at the hospital the decision to involuntary commit your loved one is up to the doctor. Again, just like the police doctors do not make this decision lightly.

While “almost all states allow police and clinicians to initiate short term commitments lasting up to seventy-two hours to handle imminent emergencies” there are legal statutes that must be met to hold a person against their will. Please click on the following link for more information and rules in your state (<https://www.treatmentadvocacycenter.org/component/content/article/183-in-a-crisis/1596-know-the-laws-in-your-state>).

Getting Help For Your Self -Voluntary

Mental disorders are treatable, but many people do not seek out help until their symptoms become severe. If you have come to the point in your life where you feel that you need help, then you are not alone. There is hope and support for you. If you present to the hospital, seek help and are admitted then this would be considered a voluntary admission. Voluntary admissions can help to identify symptoms, clarify the diagnosis and stabilize symptoms.

Your experience at the hospital will vary depending on your insurance, the hospital, the time of the day, your symptoms, if you are admitted involuntarily and if you are already on medications. But just because you make it to the hospital does not mean that you or your loved one will be admitted. For example, if you are already on medications, the hospital staff may call your outpatient treatment team for information, make adjustments and send you home with a follow-up appointment. However, while at the hospital waiting to be seen keep a few things in mind (again this list will vary).

1. You may be seen in the emergency room first unless previous arrangements were made or you are in a place like the District of Columbia that has a comprehensive psychiatric emergency admission hospital.
2. You may have a long wait (but don't let that discourage you)
3. You will be asked many questions so be patient and if possible know what medications you or your loved one is taking
4. The first Doctor you may see may not be a Psychiatrist, many times the Psychiatrist will have to be called to the emergency room to meet you. So be prepared to tell your story more than one time.
5. Even if you feel that you or your loved one is experiencing a mental health event that requires admission into a hospital, the doctor at the hospital may not feel the same way. So be prepared to make a case. Yes, sometimes you have to make a case for admission. If there are very few beds, if the Doctor thinks that you or your loved one can be stabilized with a medication change and sent back home the same night or you have insurance issues, then you or your loved one may not be admitted.

If you feel that admission is needed, then say so, but be prepared to speak to why you are seeking help. Describe the symptoms you are experiencing and explain how those symptoms are negatively impacting your life. In the case of a loved one be able to speak to what you have seen. Unfortunately, many people feel that the only way for them or for someone that they love to be admitted into the hospital is to wait until things get bad or to say that they are suicidal, while this is still very true in some cases, know that there are other ways.

For example, if a person already has a chronic health condition, are the symptoms associated with the psychiatric illness such as not taking their medications keeping them from recognizing the need to take their diabetes medication? Are the symptoms of their mental illness causing disruptions to the neighbors or strangers in the area to the point that if not managed could cause harm to your loved one? Is your loved one sleeping and if not what are they doing when they are awake? Are they losing weight? Are they not eating? Do you or your loved one already have a Psychiatrist in the community who could call and coordinate a direct admission on your behalf? Do you have a crisis team in your area (a group of mental health professionals who will respond to you at your home or your location)? The Crisis team can help you to process your symptoms and help to navigate you through the mental health services in your area.

If you are a family member of a loved one, who is currently on a psychiatric ward, visit and be involved. Get to know the treatment team to include the Attending and treating Physician (may or may not be the same person). If possible, ask for a meeting with the Social worker and or Doctor. If a date for a team meeting (a meeting in which all of the professionals involved in your loved one care meet to discuss his or her case) has been set, try to attend. Your input is valuable and can help ensure that the treatment team is focusing on the right goals (your loved one may not be able to articulate their needs clearly). Ask questions about the diagnosis, about the medications, inquire about the discharge plan and if you have concerns, share those concerns with the team. For example, you may feel that your loved one should be in the hospital for longer than two days. If that is the case be prepared to share with the team why you feel that way, let them know what you have been observing. Please understand that the goal of an inpatient hospital stay is to stabilize not to warehouse. Today, many inpatient hospitals do not have enough beds to keep people long term and many of the newer psychotropic medications work faster so people can stabilize and can go home quicker.

However, you live with your family member, and you know the challenges that you and your loved one will have to face once he or she is discharged. So share those challenges with the team and ask them to help you to develop a realistic plan that takes into account those challenges. For example, if you know that there are limited mental health supports in your area and that the earliest your loved one can get a mental health appointment in the community is three weeks from the discharge date advocate with the inpatient doctor for enough medications to cover the time.

No matter how much pain you're experiencing right now, you're not alone. Many of us have had suicidal thoughts at some point in our lives. Feeling suicidal is not a character defect, and it doesn't mean that you are crazy, or weak, or flawed. It only means that you have more pain than you can cope with right now. But with time and support, you can overcome your problems and the pain and suicidal feelings will pass.

Some of the finest, most admired, needed, and talented people have been where you are now. Many of us have thought about taking our own lives when we've felt overwhelmed by depression and devoid of all hope. But the pain of depression can be treated and hope can be renewed.

No matter what your situation, there are people who need you, places where you can make a difference, and experiences that can remind you that life is worth living. It takes real courage to face death and step back from the brink. You can use that courage to face life, to learn coping skills for overcoming depression, and for finding the strength to keep going.

Remember:

- Your emotions are not fixed—they are constantly changing. How you feel today may not be the same as how you felt yesterday or how you'll feel tomorrow or next week.
- Your absence would create grief and anguish in the lives of friends and loved ones.
- There are many things you can still accomplish in your life.
- There are sights, sounds, and experiences in life that have the ability to delight and lift you—and that you would miss.
- Your ability to experience pleasurable emotions is equal to your ability to experience distressing emotions.

Why do I feel suicidal?

Many kinds of emotional pain can lead to thoughts of suicide. The reasons for this pain are unique to each one of us, and the ability to cope with the pain differs from person to person. We are all different. There are, however, some common causes that may lead us to experience suicidal thoughts and feelings.

Why suicide can seem like the only option

If you are unable to think of solutions other than suicide, it is not that other solutions don't exist, but rather that you are currently unable to see them. The intense emotional pain that you're experiencing right now can distort your thinking so it becomes harder to see possible solutions to problems—or to connect with those who can offer support.

Therapists, counselors, friends, or loved ones can help you to see solutions that otherwise may not be apparent to you. Please give them a chance to help. A suicidal crisis is almost always temporary.

Never Give Up! If You Are Having Suicidal Thoughts

Although it might seem as if your pain and unhappiness will never end, it is important to realize that crises are usually temporary. Solutions are often found, feelings change, unexpected positive events occur. Remember: suicide is a permanent solution to a temporary problem. Give yourself the time necessary for things to change and the pain to subside.

Even problems that seem hopeless have solutions

Mental health conditions are all treatable with changes in lifestyle, therapy, and medication. Most people who seek help can improve their situation and recover.

When medication is prescribed, for example, finding the right dosage often requires an ongoing process of adjustment. Don't give up before you've found the solution that works for you. Virtually all problems can be treated or resolved.

Take these immediate actions

If you're feeling suicidal at this moment, please follow these five steps:

Step #1: Promise not to do anything right now -Even though you're in a lot of pain right now, give yourself some distance between thoughts and action. Make a promise to yourself: "I will wait 24 hours and won't do anything drastic during that time." Or, wait a week.

Thoughts and actions are two different things—your suicidal thoughts do not have to become a reality. There is no deadline, no one's pushing you to act on these thoughts immediately. Wait. Wait and put some distance between your suicidal thoughts and suicidal action.

Step #2: Avoid drugs and alcohol -Suicidal thoughts can become even stronger if you have taken drugs or alcohol. It is important to not use nonprescription drugs or alcohol when you feel hopeless or are thinking about suicide.

Step #3: Make your home safe -Remove things you could use to hurt yourself, such as pills, knives, razors, or firearms. If you are unable to do so, go to a place where you can feel safe. If you are thinking of taking an overdose, give your medicines to someone who can return them to you one day at a time as you need them.

Step #4: Don't keep these suicidal feelings to yourself -Many of us have found that the first step to coping with suicidal thoughts and feelings is to share them with someone we trust. It may be a family member, friend, therapist, member of the clergy, teacher, family doctor, coach, or an experienced counselor at the end of a helpline.

Find someone you trust and let them know how bad things are. Don't let fear, shame, or embarrassment prevent you from seeking help. And if the first person you reach out to doesn't seem to understand, try someone else. Just talking about how you got to this point in your life can release a lot of the pressure that's building up and help you find a way to cope.

Step #5: Take hope – people DO get through this -Even people who feel as badly as you are feeling now manage to survive these feelings. Take hope in this. There is a very good chance that you are going to live through these feelings, no matter how much self-loathing, hopelessness, or isolation you are currently experiencing. Just give yourself the time needed and don't try to go it alone.

Reaching out for help—Even if it doesn't feel like it right now, there are many people who want to support you during this difficult time. Reprinted: <https://www.helpguide.org/articles/suicide-prevention/are-you-feeling-suicidal.htm>

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Our mission is to promote the well-being of the individuals and families in Washington D.C. by providing accessible, quality human services in a holistic fashion focusing on the body, the mind, and the spirit.

Thank You For Coming!