Meet Jim Steinhagen, new head of the Betty Ford Center

Before heading the Betty Ford Center, Jim Steinhagen was executive director of the Hazelden Youth Continuum and the Center for Youth and Families in Plymouth, Minnesota. Jim has over three decades of experience in the field of addiction treatment. Prior to joining Hazelden, he lived in Sweden for five years working as a consultant and providing expertise in setting up Minnesota Model treatment programs focused on target populations of youths, individuals with criminal histories, and mothers with children. Steinhagen also worked in addiction services at St. Mary’s Hospital in Minneapolis. He has a bachelor’s degree in psychology from Metropolitan State University and a master of health and human services administration from St. Mary’s University.

Q: Why were you excited to take this job?
The Betty Ford Center has been and is one of the most iconic “brands” in the treatment field. Having a chance to be a part of that brand and to be responsible for fostering Mrs. Ford’s legacy as part of the Hazelden Betty Ford Foundation is an amazing opportunity. On a personal note, my wife moved to Minnesota from California 12 years ago, and this was a chance for her to “come home” and be closer to her family.

Q: What are your first impressions?
I’ve been deeply inspired by the high degree of passion, dedication, and expertise of the staff. The unwavering top priority is to enhance Mrs. Ford’s legacy and provide the highest-quality of care for our patients and families.

Q: What are the top three reasons you think a referent should consider sending a patient to the Betty Ford Center?
First, we have a highly competent and dedicated workforce. Second, our continuum of services allows for varying levels of care (detox, inpatient, structured housing, etc.) and short- or long-term lengths of stay at the appropriate level of care. Patients have their care plan tailored to their individual needs. Third, we partner with professionals through the entire treatment process to ensure the best outcomes for their patients and the family members.

Q: What are your priorities for the next 6–12 months?
I have five priorities that I will be focusing on: (1) familiarize myself with the Betty Ford Center campus and staff; (2) support the integration and alignment of structures and services of Hazelden and the Betty Ford Center into one organization; (3) conduct listening sessions with professional partners in the Southwest Region; (4) begin establishing relationships with service providers and key stakeholders in the region; and (5) compile the data from the listening and partnering sessions into a plan of action that strengthens our position as the provider of choice for addiction and substance abuse treatment going forward.

Q: Do you anticipate a lot of changes?
Much will remain the same as it relates to the model of care. Our clinical and corporate teams are working to align, integrate, and standardize services and processes within the Hazelden Betty Ford Foundation system where it makes sense. We will follow the science and as it informs best practices, we will adapt and incorporate new tactics into our model to always provide our patients with the best chance for a positive, lasting outcome.
Q: At the end of 2014, you are opening an outpatient center in Los Angeles. Will you open more outpatient centers? How does this fit into the long-range plan?

The Hazelden Betty Ford Foundation board of trustees sees an opportunity to extend our reach to more people in need of our services at the outpatient level of care. The Affordable Care Act is going to make the services we provide available to more people. There is a pressing demand for additional treatment options. With expanded outpatient services, we’ll be able to provide our high-quality care in a convenient location, with convenient scheduling and community resources. Outpatient centers also will allow us to provide a continuum of care as residential patients step down gradually to lower levels of care, thus providing a seamless experience in a system the patient has come to trust.

Q: What is Betty Ford Center’s competence around co-occurring disorders?

Our psychiatrists and psychologists are world-class experts in the diagnosis and treatment of addiction and mental health issues. The services offered through our mental health program address the acuity and complexity seen in our patients. Our plan is to expand our mental health services by further integrating co-occurring disorders care into our model of care and delivery systems.

Q: What will be the focus of your new medical director?

The addition of Dr. Steve Eickelberg to the Betty Ford Center team is a tremendous win. He is a seasoned professional and expert in psychiatry and addiction medicine. He will work to enhance our mental health services and also champion the integration of COR-12 (Hazelden’s successful opioid addiction treatment program) into our service structure.

Q: Will you be targeting certain populations?

We’re already known for our professionals program, youth program, chronic pain and addiction program, residential day treatment program, and children’s programs. Two groups I’m interested in adding specific programming elements for are the LGBTQ and the older adult populations. These two programs already exist within Hazelden Betty Ford Foundation centers—Hazelden at Springbrook and Hazelden at Naples. Both have been successful in achieving excellent outcomes. We will partner with these programs to offer the same high-quality services on the Betty Ford Center campus.

Q: What is the Betty Ford Center’s philosophy on cross addictions—such as food, sex, and gambling—as they relate to treating alcoholism and drug addiction?

Training our clinical staff on best practices to effectively address complicating or co-occurring disorders is an ongoing, high priority. Our clinical team assesses the level of acuity with other disorders in each of our patients and communicates in the care plan how to address these issues. They consider supplemental support, when necessary. The goal is to give patients the best chance of long-term success. We believe we can effectively address many co-occurring or complicating issues concurrently while treating the chemical addiction. When the acuity is beyond what’s manageable in our setting, we’ll look to one of our behavioral health partners and make the appropriate referral.

Q: What do you do in your leisure time?

I’m blessed to be in long-term recovery and am always energized by recovery-oriented events and the great fellowship and friends that come from being active in recovery. When we have time, my wife and I love to visit new places and cultures. I enjoy watching sports, both in person and on TV. My wife and I typically attend the U.S. Open in New York but plan to switch to the Indian Wells Masters in the Coachella Valley, now in our backyard. We have a Great Dane and a cat!