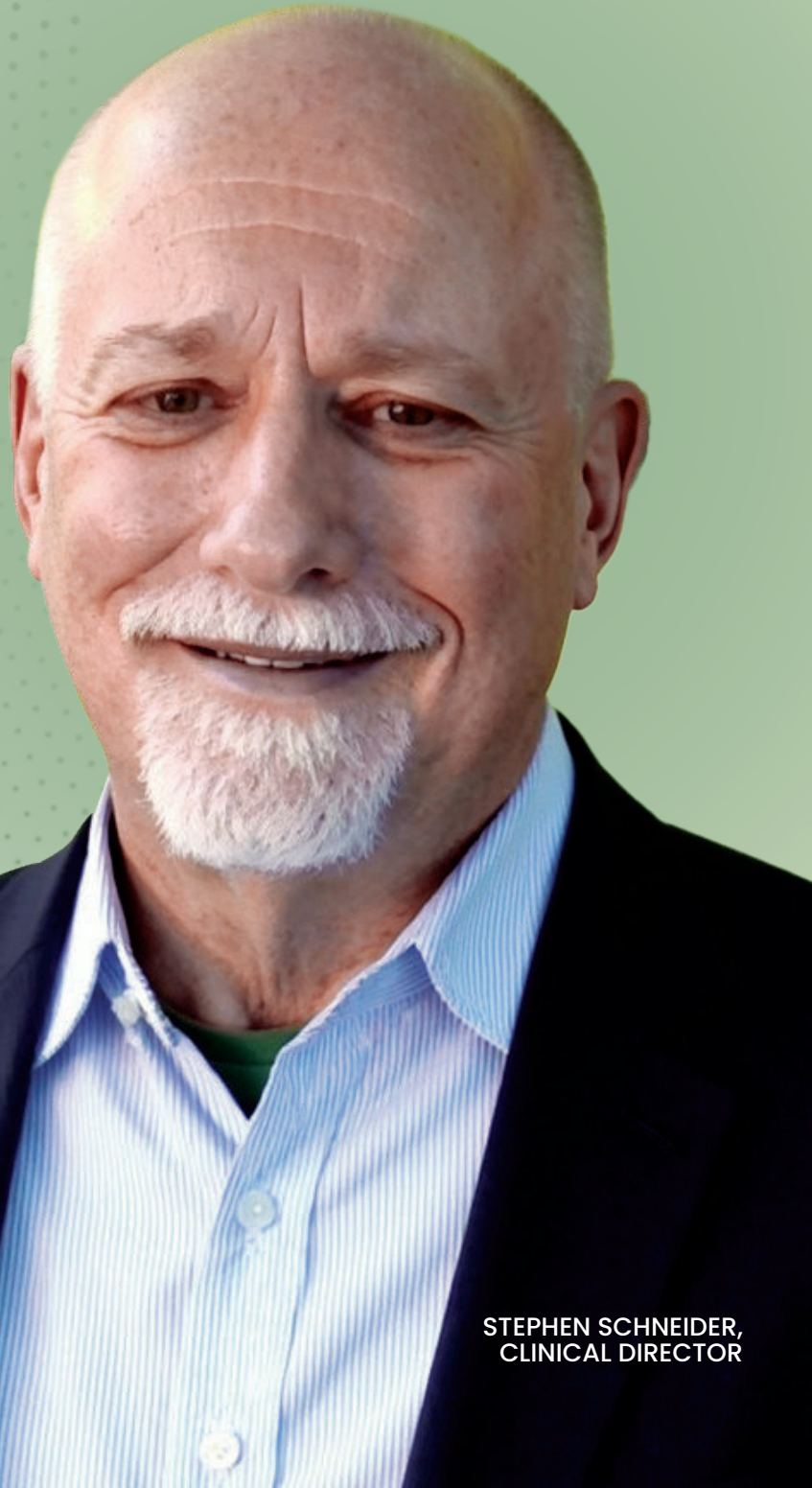


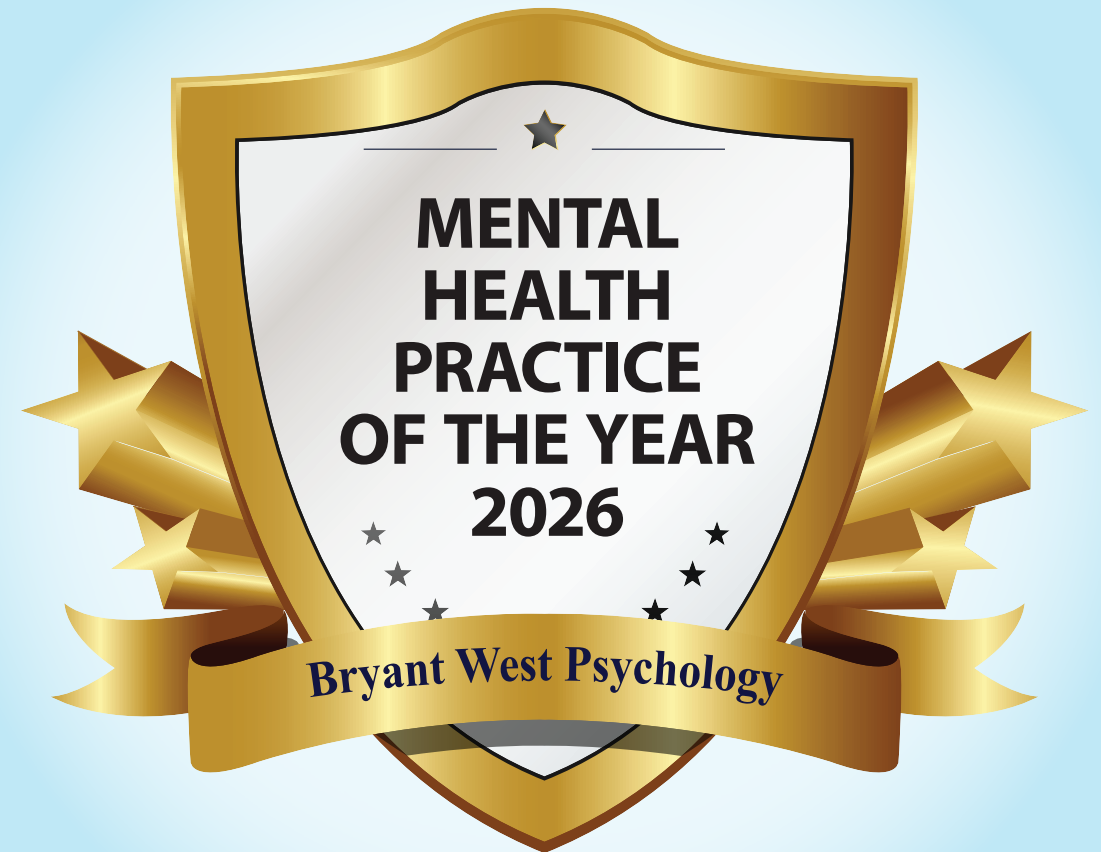


BRYANT WEST PSYCHOLOGY

BUILDING A ONE-STOP THERAPEUTIC HOME FOR COORDINATED MENTAL HEALTH CARE



STEPHEN SCHNEIDER, CLINICAL DIRECTOR



COVER STORY

BRYANT WEST PSYCHOLOGY

BUILDING A ONE-STOP THERAPEUTIC HOME FOR COORDINATED MENTAL HEALTH CARE

Outpatient mental health care is often structured in a way that fragments the patient experience. Therapy, medication management and assessment are delivered by separate providers, requiring individuals to repeat their history, rebuild trust and coordinate their own care at a time when they are least equipped to do so.

Bryant West Psychology was built to create a better experience.

Founded in New York City in 2020, the practice integrates psychotherapy, psychiatry and psychological assessment within a single clinical environment. Clinicians share records, collaborate in person and work from a unified understanding of each patient. Care develops as needs evolve. Patients don't need to start over at each step.

Psychotherapy remains the foundation of treatment. When additional clarity or support is needed, psychological assessment and psychiatric consultation are introduced, allowing care to expand without losing continuity.

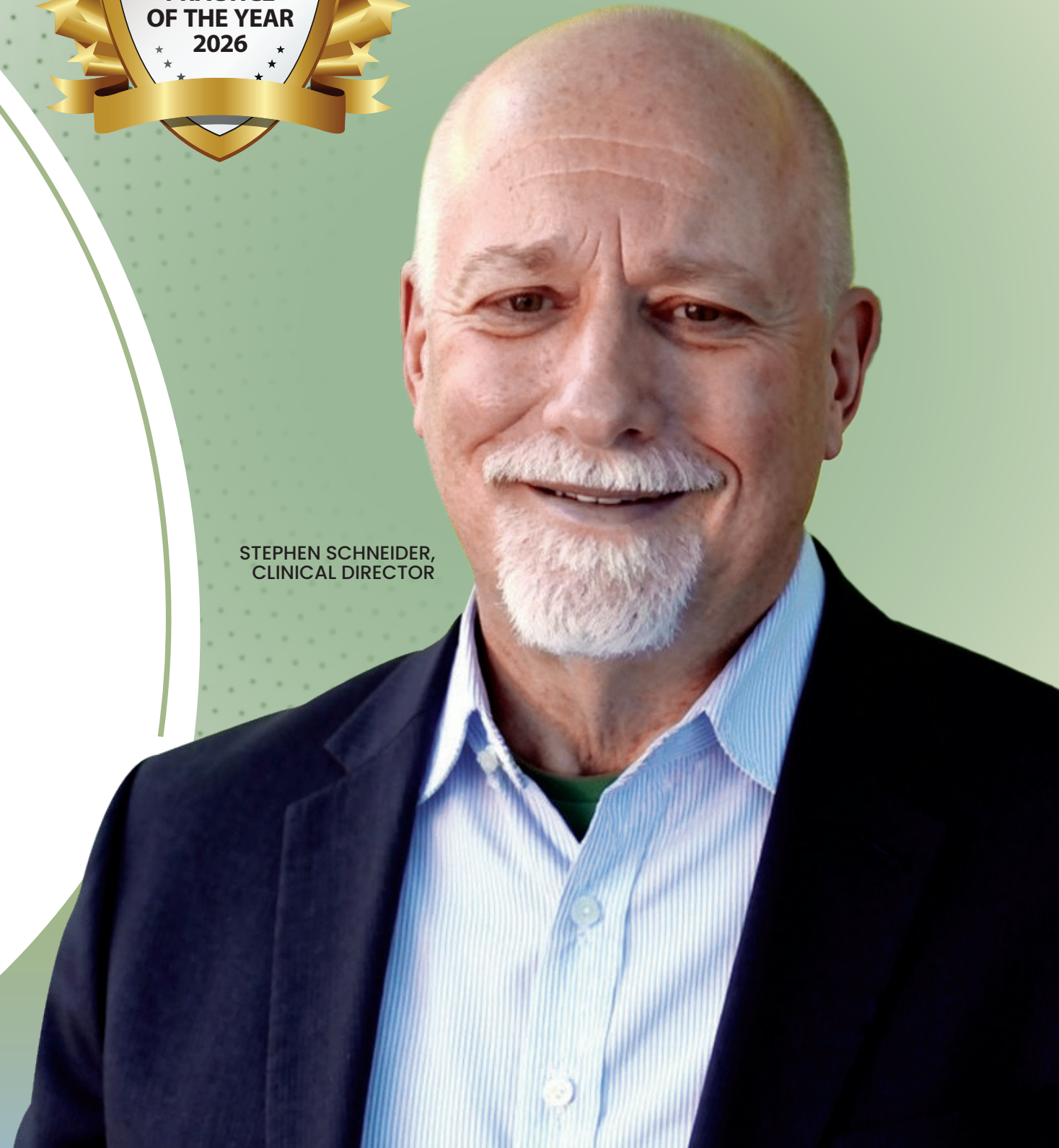
Assessment is used to better understand overlapping conditions such as ADHD, autism spectrum and learning differences when diagnostic questions arise and refine treatment without interrupting the course of care. Psychiatric consultation supports patients who may benefit from medication in addition to therapy. Since these services are available in-network, they remain accessible to a broader range of patients while preserving clinical coordination.

When needs extend beyond the practice, referrals are made with continuity in mind, ensuring that progress carries forward rather than being disrupted. The model addresses a broader challenge in U.S. healthcare: services often operate in silos, fragmenting the patient experience.

"We provide patients a 'therapeutic home' where they can build trust with one provider and extend that relationship across services without disruption," says Stephen Schneider, clinical director. "Because all services sit under one roof, providers can communicate easily and develop a shared understanding of the patient, which



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creates a much smoother experience for people seeking help.”

A Clinical Philosophy Grounded in Human Complexity

While integration defines the structure, Bryant West Psychology’s work is grounded in a relational understanding of human experience, a perspective that Schneider has developed over more than 30 years of clinical practice.

Clinicians approach each patient with the recognition that individuals are shaped through relationships, family, culture and broader social systems and that these experiences continue to influence how they understand themselves and relate to others. Early patterns, including those formed in response to trauma or adaptation, often remain active even when they are not fully conscious.

Treatment begins with the clinician’s understanding of what it means for a patient to seek help and depend on another person. Establishing safety and trust is the first priority. From there, patients are guided to explore experiences that come into view in the context of a therapeutic relationship - one that intentionally welcomes into view what may have been repressed or dissociated - kept “non-conscious” because such knowledge may have been unthinkable within earlier relational contexts.

Schneider’s approach places the therapeutic relationship at the center of care, emphasizing engagement and understanding over rigid adherence to predefined treatment models. The emphasis is not on applying a single model, but on adapting care to what is needed in the moment.

Progress becomes visible when patients begin to engage with emotions that had been held back, like grief, anger and fear, or when new possibilities for their lives

begin to take shape. Therapy extends beyond symptom management. It supports patients in reconnecting with aspects of themselves that were buried to cope or adapt.

Research consistently shows that the quality of the therapeutic relationship is a central factor in outcomes. That understanding guides how care is delivered in practice.



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Collective Clinical Thinking as a Model of Care

Delivering care for complex psychological conditions requires more than individual expertise. It requires shared clinical thinking.

That’s why Bryant West Psychology structures collaboration through weekly case conferences. Clinicians present challenging or high-risk cases, including those involving suicidality tendencies or other personal safety concerns and review treatment approaches as a group. These discussions bring together multiple perspectives to develop coordinated plans of care.

Each case is reviewed in detail, including the patient’s history, symptoms, course of treatment and current risk factors, ensuring that decisions are grounded in a

comprehensive clinical understanding. Rather than placing responsibility on a single provider, clinical reasoning is distributed across the team.

Therapists trained in cognitive-behavioral therapy (CBT), dialectical behavior therapy (DBT) and acceptance and commitment therapy (ACT) contribute their perspectives, while Schneider and others offer a relational, psychoanalytic lens. The goal is to integrate these viewpoints into a cohesive understanding of the patient.



Training as an Extension of Clinical Responsibility

Education and mentorship form an integral part of Bryant West Psychology’s model.

The practice operates a postdoctoral fellowship program designed to support early-career psychologists as they develop clinical judgment. Fellows receive multiple layers of supervision each week, participate in case conferences across different treatment settings, and attend specialized seminars in psychotherapy and assessment.

The structure reflects the rigor of academic medical centers while remaining embedded within a private practice environment.

Training is not treated as a separate function. It operates within the clinical system itself. Developing clinicians work within a supported framework, while patients benefit from care shaped by multiple layers of oversight and expertise. Many fellows remain with the practice, which strengthens continuity within the clinical team over time.

Inclusion as Clinical Practice, Not Policy

Operating in New York City means working within one of the most diverse and complex human environments in the world.

Bryant West Psychology approaches that diversity as a rich and valuable clinical reality. Patients arrive with

identities shaped across culture, race, gender, sexuality, religion and ability, often navigating environments where aspects of themselves have been unseen, constrained and marginalized.

The practice works with both adults and children, reflecting the range of needs across the communities it serves. The expansion into child and adolescent care extends this model across different life stages, enabling patients and families to access support within the same clinical environment.

Clinicians approach each patient with curiosity, humility and respect for differences. Identity is understood as layered and interconnected, shaping how individuals experience themselves and their relationships. They actively create an environment where patients feel understood, supported and able to engage fully in care.

As trust develops, therapy engages more fully with those experiences. That depth allows care to reflect the complexity of the individual.

Supporting Clinicians as a Condition for Effective Care

Mental health professionals often spend their careers helping others navigate emotional challenges. Maintaining that level of empathy requires sustained professional support.

Bryant West Psychology approaches clinician well-being as an operational priority rather than a secondary consideration.

Therapists receive competitive compensation and benefits. The practice also focuses on creating a workplace culture that encourages connection and collaboration. Clinicians gather in shared spaces between sessions, participate in case discussions and maintain open lines of communication with leadership. Flexible schedules allow therapists to balance in-person and remote work, as needed.

The number of weekly patient hours is limited to protect therapists’ well-being. Time away from work helps them recharge emotionally and remain present for their patients.

“When clinicians feel supported and valued, they are able to show up for patients with warmth, insight and vitality,” Schneider explains.

Bryant West Psychology has been recognized as Mental Health Practice of the Year 2026 by Medical Care Review. The recognition is about more than the integration of services. It reflects a response to a structural limitation within outpatient mental health care, where fragmentation, standardization and clinician strain often operate in parallel.

Aligning continuity of care with relational depth and clinician support reframes treatment not as a sequence of services, but as a sustained clinical process, one that remains connected to the person it is designed to serve.