



Behavioral Health Partnership Oversight Council

Child/Adolescent Quality, Access & Policy Committee

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www.cga.ct.gov/ph/BHPOC

Co-Chairs: Hal Gibber, Sherry Perlstein & Jeff Vanderploeg

Meeting Summary
Wednesday, March 18, 2015
2:00 – 4:00 p.m.
Value Options
Rocky Hill, CT

***NOTE* Next Meeting: Joint Meeting with Operation Committee**
on Friday, April 10, 2015 @ 2:30 PM
at VO, Rocky Hill

Attendees: Sherry Perlstein (Co-Chair), Jeff Vanderploeg (Co-Chair), Jean Adnopoz, Vickie Alston, Robyn Anderson, Karen Andersson (DCF), Dr. Kathleen Balestracci, Deb Batsie-Hernandez, Lois Berkowitz (DCF), Tara Davila, Christine Dauser, Tere Foley, Elizabeth Garrigan, Steve Girelli, Ebony McDaniel-Gladding, Joan Narad, Kim Nelson, Ann Phelan, Donyale Pina, Dr. Robert Plant (VO), Kristin Pracitto, Maureen Reault, Lynne Ringer (VO), Knute Rotto, Sherrie Sharp, John Torello, and Kimberly Turner-Haugabook

Co-Chair Sherry Perlstein convened the meeting at 2:08 PM and members introduced themselves.

IICAPS: Katie Balestracci, MSW, PhD-Director of Research and Evaluation/Yale Child Study Center and Bert Plant, PhD, Senior VP Quality and Innovation (VO)



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- Review of IICAPS data from Calendar Year 2011
- Analyses focused on service utilization post-IICAPS, at 30, 60, 90, and 180 day intervals
- 40% of clients are involved in outpatient treatment at 30 days post IICAPS discharge; 70% by 180 days.
 - These data were used to inform development of a performance initiative by VO targeting service connection rates for IICAPS clients upon discharge

- IICAPS Services and ValueOptions also examine emergency department use, inpatient use, and spending post-IICAPS
- Current volume of IICAPS includes 20 sites, 145 teams, and 2000 discharged youth and families per year
- Update on Randomized Controlled Trial (RCT) for IICAPS
 - Enrollment ended June 2014; 110 clients enrolled and 14 participants withdrew
 - First round of study results are expected by December 2015
 - The RCT has been funded by Yale and involves IICAPS clients at the Yale Child Study Center site only
 - They use parent report of other services received during and after IICAPS as well as DSS claims data
 - Randomization is stratified by prior hospitalizations and age
 - The comparison group receives a maintenance program
 - Outcome measures include hospitalizations and out-of-control behavior as measured by the Retrospective Modified Overt Aggression Scale (R-MOAS)
 - Analyses presented focused on predictors of treatment completion
 - Participants noted the difference between examining treatment completion vs. symptom reduction and other factors of treatment response and effectiveness of IICAPS
 - Principal Components Analysis used to group independent variables together into meaningful categories; 4 of 5 groupings were interpretable.
 - Future analyses of the data will examine person-centered approaches predictors of symptom reduction

Multidimensional Family Therapy: Review of 2013 In-Patient Data- Dr. Tere Foley LMFT, Program Manager/MDFT Lead (DCF) and Robyn Anderson-Director of MDFT Quality Assurance (ABH)



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Multidimensional Family Therapy (MDFT) is a family-based outpatient treatment developed for high-risk and drug-using adolescents that has been validated for use as a prevention model, an early intervention approach, outpatient substance abuse treatment, partial hospitalizations/day treatment model and intensive alternative to residential placement, (see above).

New Business

Co-Chair Sherry Perlstein asked members to review the data that was presented. She then told committee members that the next the scheduled April 15th meeting will be replaced with a joint meeting with the BHP Operations Committee at 2:30

PM on Friday, April 10, 2015 at Value Options in Rocky Hill. The meeting was adjourned at 4:07 PM.

***NOTE* CHANGE OF DATE: Next Meeting: Joint Meeting with
Operation and Adult QAP Committees on Friday, April 10, 2015
@ 2:30 PM
at VO, 3rd Floor, Rocky Hill**

**May 20, 2015 at 2:00 PM Meeting will be in the
Huntington Room on the Fourth Floor**