

CT Contracted Service Array: Substance Use

Service Model	Descriptor	Target Population	Average LOS, Annual Capacity	Catchment Area
Adolescent Community Reinforcement Approach-Assertive Continuing Care (ACRA-ACC)	ACRA-ACC is an evidence-based adolescent substance use treatment model which uses social, recreational, familial, school or vocational reinforcers, and skills training so that non-substance using behaviors are rewarded and can replace substance use behavior. It is delivered in a clinic, community, or home setting.	Youth 12-17 years who: <ul style="list-style-type: none"> ○ has an identified substance use issue; and ○ meets ASAM criteria for Outpatient level of care. <i>18 year olds may be admitted on a case-by-case basis.</i>	LOS: 6 months Annual Capacity: 288	Statewide
ASSERT Treatment Model (ATM)	MDFT is the primary intervention. ATM adds medication assisted treatment (MAT) when appropriate, and 12 months of Recovery Management Checkups and Support (RMCS).	Youth up to age 21 with opioid use disorder.	LOS: Up to 18 months Annual Capacity: TBD	Existing MDFT teams in DCF Regions 3, 4, 5, 6.
Multidimensional Family Therapy (MDFT)	MDFT is an evidence based intensive, in-home model that is a family-centered, comprehensive treatment program for adolescents and young adults with significant behavioral health needs and either alcohol or drug related problems, or at risk of substance use.	Youth 9 -18 years old who: <ul style="list-style-type: none"> ○ Live at home with or return to a primary caregiver ○ Substance use or at-risk for substance misuse ○ Other psychiatric issues can be present 	LOS averages 5 months Annual Capacity: 1080	Statewide: 18 teams
Multisystemic Therapy (MST)	MST is an evidence-based in-home treatment for youth with complex clinical, substance using, social, and educational problems. MST emphasizes behavioral change in the natural environment and uses interventions to promote the parent's capacity to monitor and intervene positively with each youth.	Youth 12-17 with antisocial, acting out, substance using, and/or delinquent behaviors. 18 year olds may be admitted on a case by case basis.	LOS: 3-5 months Annual Capacity: 201	*DCF Area Offices: Bridgeport, Hartford, Manchester, Milford, New Britain, New Haven, Norwich, Waterbury, Willimantic
Multisystemic Therapy for Emerging Adults (MST-EA)	MST-EA is for youth aged 17- with multiple co-occurring problems and extensive systems involvement.	Youth between their 17 th and 21 st birthdays; aging out of foster care/child welfare involved; and have a serious behavioral health condition(s).	LOS: 4-12 months Avg LOS: 7-8 months MST-EA Coach Max LOS: 14 months. Annual Capacity: 66	2 MST-EA teams serving Bridgeport, Waterbury & Milford, Hartford, Manchester & New Britain.
Total Capacity of Youth Services			1635	

Service Model	Descriptor	Target Population	Average LOS, Annual Capacity	Catchment Area
Family Based Recovery (FBR)	FBR is an intensive, in-home clinical treatment program for families involved with DCF who have infants or toddlers (birth to 36 months) who are at risk for abuse and/or neglect, poor developmental outcomes and removal from their home due to parental substance misuse. Interventions include an evidence-based substance use treatment (Reinforcement Based Therapy) with a preferred practice to enhance parenting and parent-child attachment, and case management.	DCF-involved caregivers - Index parent(s) (who has an alcohol and/or drug problem) and the index child (who is aged birth – 36 months) whose family meets the admission criteria.	LOS: 7 - 12 months depending upon needs of the family. Annual Capacity: 264	Statewide
Multisystemic Therapy-Building Stronger Families (MST-BSF)	MST-BSF uses two evidence-based practices (MST-Child Abuse Neglect and Reinforcement Based Therapy), as well as trauma treatment for all family members who need it. MST-BSF, provides intensive in-home family and community based treatment to families that are active cases with DCF due to the physical abuse and/or neglect of a child in the family and due to the substance use by at least one caregiver in the family.	DCF-involved caregivers with a youth between the ages of 6 and 17 who meet the admission criteria.	LOS: 6-9 months Annual Capacity: 147	7 DCF Area Offices: Bridgeport & Norwalk Meriden & New Britain, Hartford, Waterbury, New Haven, Manchester, Norwich.
SAFE Family Recovery (SAFE-FR)	SAFE-FR provides three (3) evidence-based approaches to support caregivers impacted by substance use. The three services are: <ul style="list-style-type: none"> a. Screening, Brief Intervention, and Referral to Treatment (SBIRT) identifies those who may benefit from treatment, and motivates to receive referral; b. Multidimensional Family Recovery (MDFR) engages caregivers in substance use treatment and provides various child well-being education sessions; c. Recovery Management Check-ups and Support (RMCS) provides regular check-ins to detect return to use and make quick linkages to services. 	DCF involved adults (18 and older) 6in caregiver roles	SBIRT: LOS = 30 minute appointments Capacity = 4,680 MDFR: LOS = 4 months Capacity = 810 RMCS: LOS = 6 months Capacity = 720	Statewide
Total Capacity of Adult Services			SU Screening: 4680 <u>Interventions: 1941</u> Total: 6621	