

IICAPS: Connecticut's Premier Intensive In-Home Child and Adolescent Psychiatric Services

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Intensive In-Home Child and Adolescent Psychiatric Services (IICAPS)

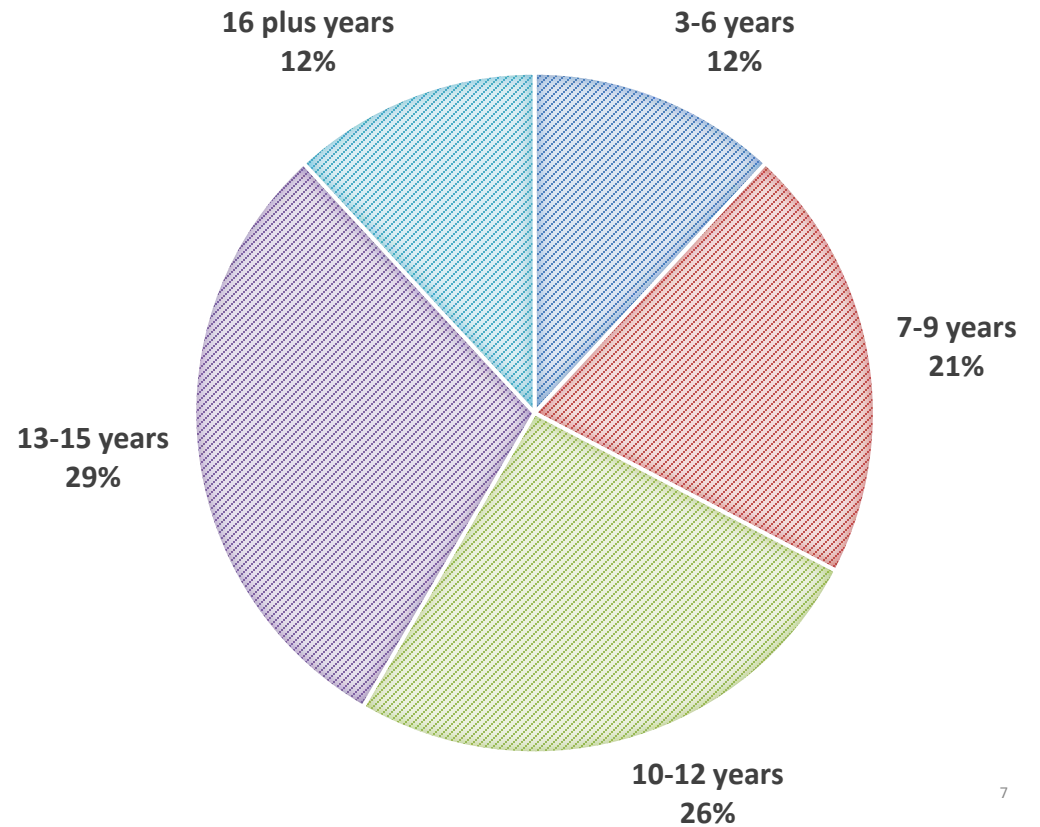
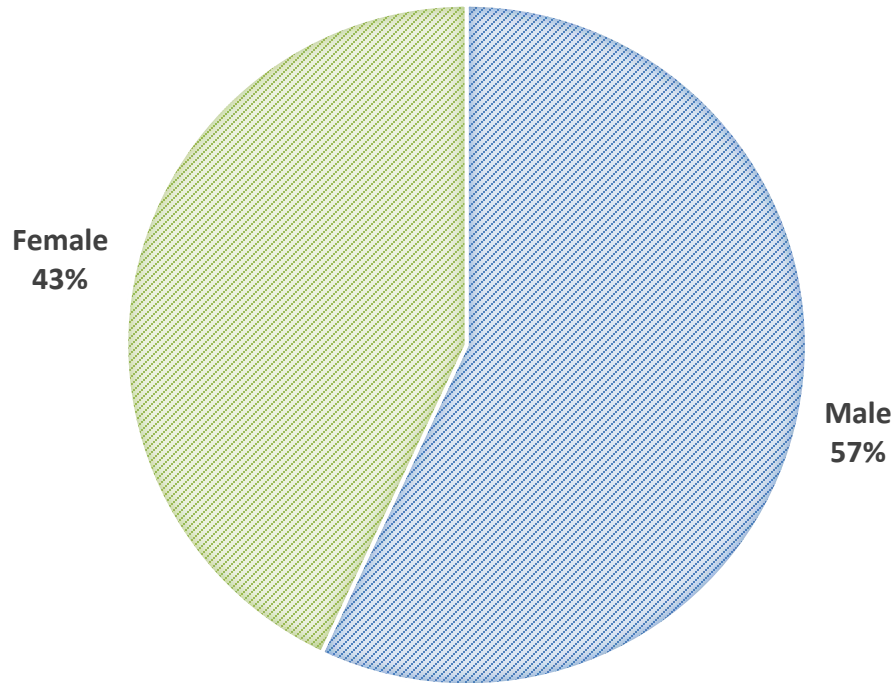
- 4-6 hours of support weekly including parent, child, and family sessions
- Two-person team – MHC and Masters Level Clinician
- Attachment and multigenerational complex-trauma informed
- Addresses both parent and child mental health
- Clinical work in 4 domains: Child, Family, School, Community
- Referrals from Inpatient units, Emergency Departments, Child Protective Services, IOP/PHP, PRTF, Schools, Child Guidance Clinics

Target Population

Children and adolescents (4-18) with severe emotional/psychiatric disturbance (Axis I) who are:

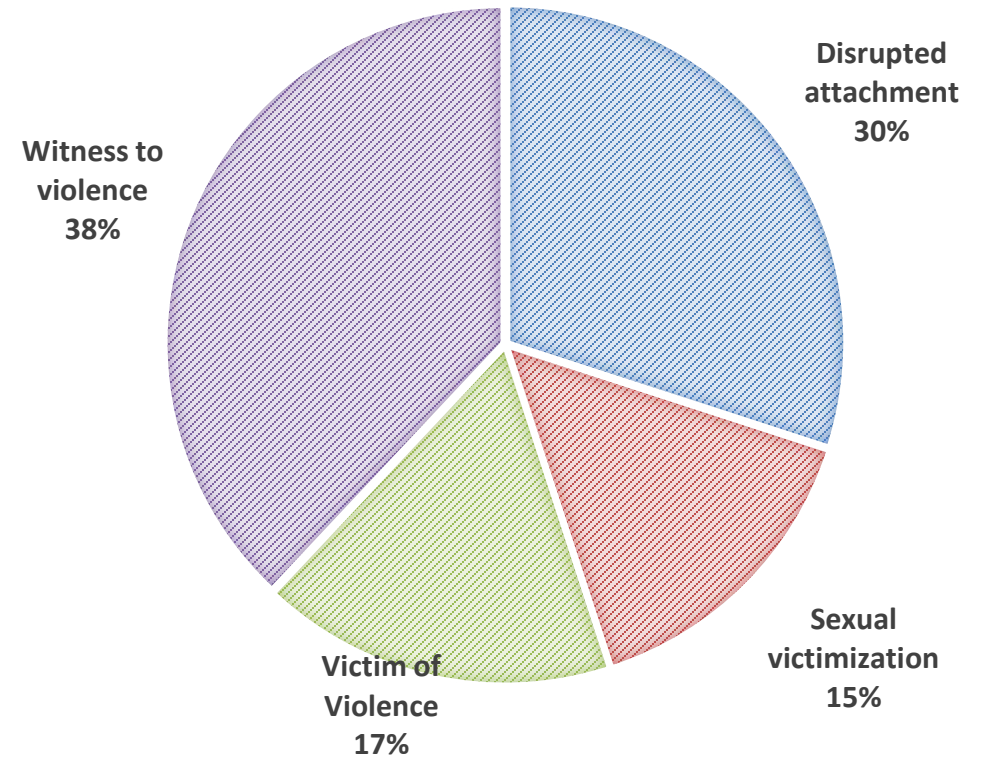
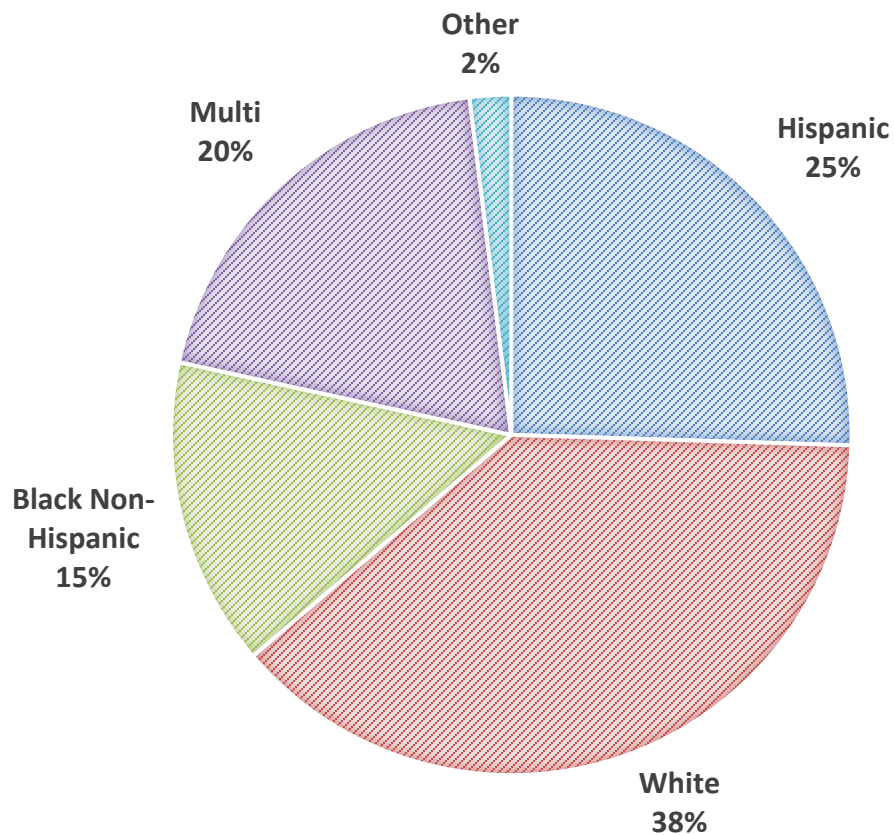
1. unable to be discharged successfully/safely from institutional treatment due to a lack of home/community resources
2. at risk for psychiatric institutional-based treatment
3. “gravely disabled” and unresponsive to clinic-based services

Sex and Age (2014-2019 = 12,602)



* Beginning to collect and analyze data about gender variance and hope to present this soon

Race and Complex Trauma (2014-2019 =12,602)



- 67% of children and adolescents report one or more experiences of complex trauma⁸
- Diagnosis data is extremely variable, and many kids have multiple diagnosis
- Roughly half of IICAPS parents endorse 4+ adverse childhood experiences

OUTCOMES (2014-2019)

Significant reduction in Ohio scale symptom severity and improvement in Ohio scale functioning for treatment completers.

- 50% of cases on average showed clinically reliable changes
- Treatment completion rate: 73% trending upwards

Significant reduction in service utilization for treatment completers.

- > 60% reduction in hospital admissions
- >50% reduction in inpatient days,
- 40% reduction in ED visits

For the 73% of families who discharge having successfully completed treatment, these improvements have been shown to be maintained 6 months after discharge.

Satisfaction

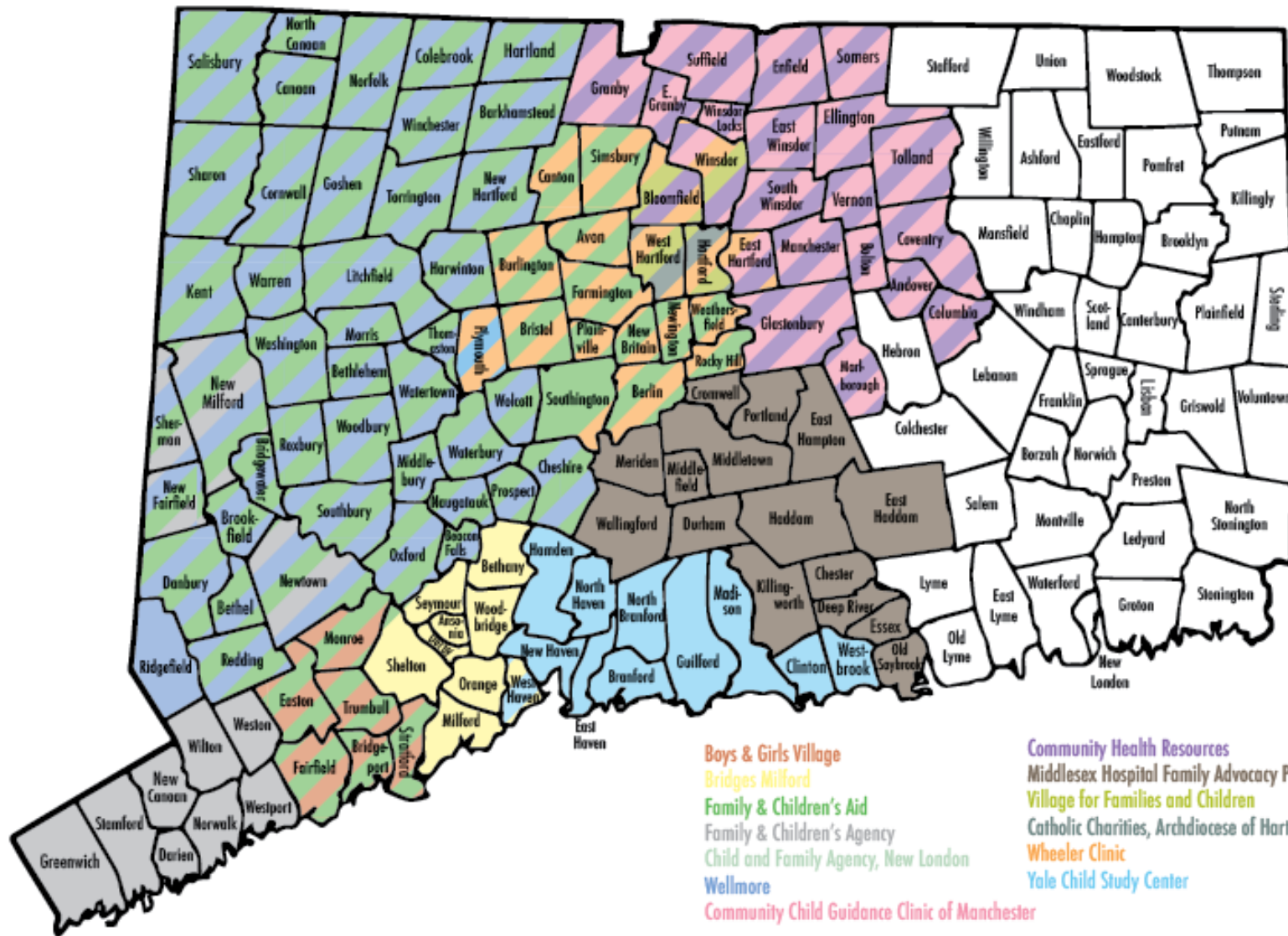
Of those who complete the treatment satisfaction survey (82.3%)

86.3% report Agree or Strongly Agree that they had a positive experience, felt the intervention improved the parent/child relationship, and that the team was respectful of their cultural/ethnic background and religious beliefs.

Funding Mechanism

- Fee-For-Service through Connecticut Behavioral Health Partnership
- Medicaid and some Private Insurance
- IICAPS Model Development and Operations funded through DCF grant

IICAPS Network 2023



Outcomes for FY2023 = 1,300

76.7% completed treatment

Significant reduction in service utilization for treatment completers.

- > 56.1% reduction in hospital admissions
- >62.9% reduction in inpatient days,
- 44% reduction in ED visits

Current Reality

Missing coverage across the state largely due to staffing shortages and chronic underfunding.

State-wide waitlist has been at or around 500 for the past two years.

Sites that closed due to staffing shortages and/or underfunding closed with waitlists.

New London and Windham County have no coverage.

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Yale SCHOOL OF MEDICINE