

dmhas

Connecticut Department of Mental Health & Addiction Services Thomas A. Kirk, Jr., Ph.D., Commissioner

Community Resources: A Solid Investment

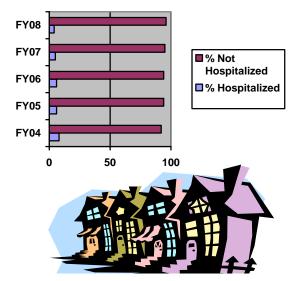
Those of us with mental health disorders have the same hopes and dreams as most people. One such hope is to live in the community as a valued citizen. The DMHAS Southwest Connecticut Mental Health System (SWCMHS) has worked to organize an effective mental health delivery system that supports people with mental illness in the community. Through a coordinated approach that links crisis services with clinical treatment teams, including intensive services such as Assertive Community Treatment (ACT) and specialty services such as the Forensic Program, SWCMHS' recovery support programs help people to successfully integrate into the community.

Fewer Hospitalizations

The hospitalization rate for SWCMHS consumers living in the community has averaged **only 5%** over the past five-year period. This coincides with the goal of working with people on an effective recovery plan and is a sound investment, reducing the high cost of hospitalizations.

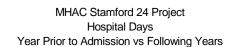
A small segment of people account for a majority of hospital days and associated costs to the system.

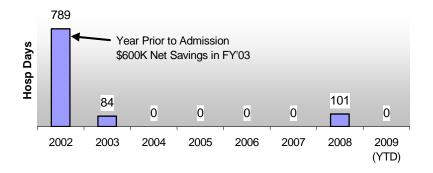
SWCMHS has targeted specific interventions for people who have been the highest users of inpatient hospitalization.



Example: The Stamford 24 Project

The Stamford 24 Project is a joint project of the F.S. Dubois Center and the Mental Health Association of Connecticut. It was initiated in 2003 to provide **intensive community-based supervised housing and support services** for five people who had experienced prolonged and/or recurrent psychiatric hospitalizations. In the prior year, they had spent an average of 43% of their time in acute psychiatric hospitals. The five people reside in two apartments in the same building and hold their own leases. The Mental Health Association residential **staff is available on-site 24 hours a day.** The DuBois Center provides **intensive case management** through its ACT service.





From the very beginning the Stamford 24 Project dramatically reduced inpatient psychiatric hospitalizations. In the first year alone, total hospital days went down 90% from 789 days to 84 days for five individuals. Net savings was approx. \$600,000 for inpatient costs for the year.

Today, the program serves seven individuals and continues to show very impressive reductions in hospitalization rates. This program was made possible with the funding from the DMHAS Discretionary Discharge Fund.