



Agency: Connecticut Department of Mental Health and Addiction Services

Commissioner: Nancy Navarretta MA, LPC, NCC

Deputy Commissioner: Colleen Harrington LCSW, MBA

Established: 1995: *The history of the Department of Mental Health and Addiction Services dates back to 1868 when the Connecticut Hospital for the Insane, what is now Connecticut Valley Hospital, was established. Public Act 95-257 formally established the Department of Mental Health and Addiction Services through the consolidation of state operated programs at Fairfield Hills State Hospital [est. 1931], Norwich Hospital [est. 1904], Connecticut Valley Hospital [est. 1868] and also shifted addiction services from under the Department of Public Health and Addiction Services to the Department of Mental Health. This shift also changed the names of both agencies, the Department of Public Health and Addiction Services became the Department of Public Health and the Department of Mental Health became the Department of Mental Health and Addiction Services.*

Statutory Authority – CGS Section 17a-450

Central Office: 410 Capitol Avenue
4th Floor
Hartford, CT 06106

Number of Employees: 3,421 (permanent, full-time FTE position count)

FY 2024 Appropriated Funds: \$737,194,514

Organizational structure:

The Department of Mental Health and Addiction Services (DMHAS) is the second largest state agency, staffing and operating the state’s only forensic hospital, Whiting Forensic Hospital, and Connecticut Valley Hospital (on May 1, 2018, the Whiting Forensic Division of CVH separated, creating two separate hospitals). DMHAS also manages a network of 13 local mental health authorities (LMHAs), six of which are operated by state employees and seven of which are funded by DMHAS and administered by private, non-profit organizations.

In addition to these facilities, the Office of the Commissioner supports overall agency operations and administration, as well as provides or funds direct services for specialty populations.

State-Operated Hospitals

Connecticut Valley Hospital
Whiting Forensic Hospital

State-Operated LMHAs

River Valley Services
Western CT Mental Health Network
Southeast Mental Health Authority
Capitol Region Mental Health Center
Southwest CT Mental Health System
CT Mental Health Center

Office of the Commissioner

Operation & Administration (*Legal, Human Resources, Policy & Governmental Affairs, Compliance, Fiscal, Data & Quality*)
Community Services
Managed Services
Medical Director’s Office
Opioid Services
Prevention and Health Promotion
Recovery Community Affairs
Research
Statewide Services
Young Adult Services



Mission and Vision

The Connecticut Department of Mental Health and Addiction Services (DMHAS) is a health care agency whose mission is to promote the overall health and wellness of persons with behavioral health needs through an integrated network of holistic, comprehensive, effective, and efficient services and supports that foster dignity, respect, and self-sufficiency in those we serve.

DMHAS envisions a recovery system of high-quality behavioral health care that offers Connecticut residents choices from an array of accessible services and supports effective in addressing their health concerns. These services and supports will be culturally responsive, attentive to trauma, built on personal, family, and community strengths, and focus on promoting persons' recovery and wellness. Through a focus on cultivating inclusive social contexts in which individuals' contributions will be valued, the DMHAS system will also foster a sense of full citizenship among persons with behavioral health needs. Finally, services and supports will be integrated, responsive, and coordinated within the context of a locally managed system of care in collaboration with the community, thereby ensuring continuity of care both over time and across organizational boundaries. As a result, each person will have maximal opportunities for establishing, or reestablishing, a safe, dignified, and meaningful life in the communities of their choice.

Statutory Responsibility & Public Service

DMHAS is the statewide adult behavioral health system safety net, serving adults over 18 years of age with mental health or substance use disorders who lack the financial means to obtain such services on their own. DMHAS serves almost 100,000 clients annually, manages a network of 13 local mental health authorities that cover every region of the state, and partners with over 130 non-profit agencies to deliver services.

DMHAS also provides prevention services across the lifespan. For all stages of life, DMHAS promotes interventions intended to prevent or delay onset of substance use and mental illness.

DMHAS continually works to enhance service effectiveness, including ongoing compliance with the highest national standards of behavioral healthcare by seeking accreditation by the Joint Commission across all its state-operated facilities, which includes two hospitals and six facilities, three of which provide inpatient treatment.

Improvements/Achievements for Fiscal Year 2023-2024

State-Operated Hospitals

DMHAS staff operate two Joint Commission accredited hospitals - Connecticut Valley Hospital and Whiting Forensic Hospital. Both are centrally located to serve the need of the state on the same campus in Middletown Connecticut.

Connecticut Valley Hospital (CVH). CVH is a 361-bed inpatient hospital that provides evidence-based inpatient (152 beds) substance use treatment, including two withdrawal management units and four inpatient rehabilitation programs, as well as eleven inpatient unit (209 beds) for persons with persistent and pervasive mental illness.

CVH FY 2024 Improvements/Achievements:

- Expanded Recovery and Peer Support division to foster maximal patient engagement, including onboarding of a new recovery services manager; instituting co-occurring peer led



supports such as dual recovery anonymous and wellness recovery action planning across general psychiatry and addictions services divisions; and initiated recovery support specialist training and certification in SMART Recovery – a leading, evidence-informed approach to overcoming addictive behaviors and leading a balanced life.

- Relaunched the 30-bed gender-specific (women) rehabilitation program, STAR: Sisters Together Achieving Recovery.
- Transformed the hospital multicultural committee to a new group named “Beyond Differences” to further promote diversity, equity, and inclusion.
- Enhanced employee development and enrichment through establishment of grand rounds series with nationally recognized leaders in psychiatry on key topics; relaunched the employee wellness center; expanded immersive motivational interviewing for employees and the online evidence-based treatment resource for clinicians; and initiated 30-minute Wellness Wednesdays.
- Expanded composting project in collaboration with the Blue Earth Compost company, which is a Connecticut company committed to improving the environment and advocating for social and environmental issues; in this endeavor, CVH was recognized as a model partner.
- Nominated for the Connecticut Hospital Association 2024 John D. Thompson Award for Excellence in the Delivery of Healthcare Through the Use of Data for the quality performance improvement work of sustained transformation, maximizing recovery-oriented patient-centered responses and avoiding restraint use; CVH has maintained record-low levels of restraint use below the national average, including elimination of certain types.
- Reopened Valley View to Go Restaurant- an onsite certified restaurant serving as vocational training program for individuals in recovery.

Whiting Forensic Hospital (WFH). WFH is licensed by DPH and is Connecticut’s only maximum-security forensic hospital. The hospital specializes in providing inpatient services to individuals involved in the criminal justice system and consists of 91 maximum security beds and 138 enhanced security beds. Services are provided to individuals who are admitted under the following categories: (1) Psychiatric Security Review Board commitment; (2) criminal court order for restoration of competency to stand trial; (3) civil commitment (voluntary or involuntary); or (4) transfer from the Department of Correction (during period of incarceration or at end of sentence).

WFH FY 2024 Improvements/Achievements:

- Implemented a new vocational rehabilitation program which allowed hospital patients to obtain and sustain community jobs that pay a living wage.
- Recognized by the Petit Family Foundation for having two of “Michaela’s gardens” in patient treatment areas.
- Collaborated with community organizations to facilitate advocacy training to enhance patient civic involvement.

State-Operated Local Mental Health Authorities (LMHAs)

DMHAS manages a network of 13 local mental health authorities (LMHAs), six of which are operated by state employees and seven of which are funded by DMHAS and administered by private, non-profit organizations. LMHAs are Joint Commission accredited, community-based centers that serve the behavioral health needs of individuals who may not otherwise receive the quality treatment they need and deserve. Each town in Connecticut is attributed to a single LMHA catchment area, which offers a wide range of therapeutic programs and crisis intervention services.

The continuum of recovery-oriented services offered at the various state-operated LMHAs include, but are



not limited to: residential, supported employment, supported education, social rehabilitation, permanent supportive housing, homeless outreach, community support program (CSP), assertive community treatment (ACT), respite, medication management, pharmacy services, mobile crisis, peer supports, integrated care, young adult services, jail diversion, and outpatient services. The FY 2024 accomplishments of the six state-operated LMHAs are outlined below.

River Valley Services (RVS). RVS was founded in 1988 when the Connecticut Valley Hospital's Outpatient Clinic received new funding for crisis and case management services. In 1996, RVS separated from CVH and became a stand-alone local mental health authority. RVS provides services to Middlesex County and the towns of Lyme and Old Lyme, and has approximately 200 employees and 15 specialized programs. Serving over 1,300 clients each year, RVS also provides respite services, residential services, and a 24/7 mobile crisis response team. RVS has two office locations in Middletown on the CVH campus and Old Saybrook.

RVS FY 2024 Improvements/Achievements:

- Expanded crisis intervention team (CIT) services embedded in Middletown Police Department through, which resulted in a 30% decrease in Middletown Police use of force reports.
- Received high ratings on conducted employee culture of safety survey (85% of participants gave an overall grade of “Very Good” or “Excellent”).
- Expanded quality clinical services and service delivery through integrated care approaches by implementing 8 additional evidence-based groups for co-occurring individuals, increasing access for individuals with substance related conditions.

Western CT Mental Health Network (WCMHN). Formed in 1996, WCMHN serves the forty-four towns in Western Connecticut through three clinical sites in Waterbury, Torrington, and Danbury. WCMHN employes approximately 250 staff and provides 21 outpatient programs with various levels of care for almost 2,000 clients annually.

WCMHN FY 2024 Improvements/Achievements:

- Participated in a Trauma Informed Fidelity Review in April 2024 with the goal of improving trauma services and becoming more trauma responsive.
- Held a Recovery Conference on May 23, 2024 titled *Rethink The Stigma*; a Young Adult Services Art Extravaganza on May 15, 2024 displaying creative artwork, speakers, singers and dance performances from open art studio members; and a Family Night dedicated to families and loved ones learning about self-care.
- Engaged staff in a four part Substance Use Disorder Series led by the Medical Director including: The Harm Reduction Tool Kit, Psychostimulants: Cocaine, Methamphetamine and others, Gambling: The Silent Addiction and The Physical Consequences of Alcohol and Opioids.
- Presented at an Integrative Care/Co-Occurring Conference at the Connecticut Women's Consortium in June 2023 and specifically discussed 'The Diversity of Groups'.

Southeastern Mental Health Authority (SMHA). Founded in May 1998, SMHA serves towns in New London County, including; Bozrah, Colchester, East Lyme, Franklin, Griswold, Groton, Ledyard, Lisbon, Montville, New London, North Stonington, Norwich, Preston, Salem, Sprague, Stonington, Voluntown, and Waterford. SMHA offers a broad range of behavioral health services and oversees the contracts of fifteen DMHAS-funded non-profit agencies. SMHA also manages and oversees a hospital inpatient intermediate care contract. The agency employs more than 150 employees and serves approximately 900 clients annually.



SMHA FY 2024 Improvements/Achievements:

- Developed a new system for completing the Continuum of Care rental assistance paperwork to streamline processes and produce efficiencies, leading to adoption statewide across DMHAS facilities.
- Implemented a safety tool (GPSAlert) for direct care staff who provide community-based services.
- Implemented a new Supervision Initiative with training provided by Yale University to strengthen clinical and non-clinical management of facility staff and ensure each employee in their respective role is able to contribute towards supporting and enhancing quality of care provided.

Capitol Region Mental Health Center (CRMHC). Located in two sites in Hartford, CRMHC's catchment area includes residents of the towns of Hartford, West Hartford, Farmington, Avon, Canton, and Simsbury. CRMHC serves approximately 2,000 unduplicated clients annually, has a 16-bed inpatient unit, and a staff of over 200. CRMHC was established in 1974.

CRMHC FY 2024 Improvements/Achievements:

- Convened a safety retreat that identified 23 follow-up action items to promote healthcare worker safety, 60% of which were completed within 6 months as of June 2024.
- Implemented a Dental Health Incentive program in which clients qualifying under the Behavioral Health Home are eligible to receive a one-time \$25 gift card based on proof of a dental appointment during the service year; added resources to assist with accessing a community-based dentist and scheduling appointments.
- Developed a healthcare disparities initiative to better understand how healthcare inequities are impacting the population served, including administration of a 16-question survey that focused on social determinants of health in 5 domains: food insecurity, housing instability, transportation challenges, education & literacy, and difficulty paying for prescriptions or medical bills.

Southwest CT Mental Health System (SWCMHS). SWCMHS serves lower Fairfield County via three sites, two in Bridgeport and one in Stamford. SWCMHS was named in the mid-1990s when the Franklin S. Dubois Center in Stamford became part of the Greater Bridgeport Community Mental Health Center system, which had been in operation since 1973. In addition to a 62-bed inpatient unit, SWCMHS also provides a full array of outpatient services to approximately 3,500 clients annually and oversees 32 DMHAS funded non-profit contracts. The agency employs more than 375 employees.

SWCMHS FY 2024 Improvements/Achievements:

- Implemented group programming on all 3 inpatient units.
- Decreased emergency clinical codes to an average of 1-2 per week from 3-4 per week.
- Increased behavioral health home enrollments from 490 in October 2023 to 706 in January 2024.
- Implemented an initiative to facilitate a citizenship test preparation program for undocumented individuals.

CT Mental Health Center (CMHC). With 550 DMHAS and Yale employees serving 4,000 clients annually, CMHC serves the Greater New Haven community. Established in 1966, CMHC also operates as a teaching and training institution in partnership with Yale University, serving as a primary and secondary placement site for psychiatry residents, and advanced fellows as well as psychology interns, nursing students, social work interns and a variety of other students aspiring to become the next generation of health service providers. CMHC contracts with 16 DMHAS-funded community-based agencies to serve people



with behavioral health disorders.

CMHC FY 2024 Improvements/Achievements:

- Increased the number of clients served by 6% from last fiscal year, and 31% over the last three years.
- Increased the number of clients served in its Behavioral Health Home initiative by 13% from last fiscal year and increased new enrollments by 92%.
- Resumed monthly Friends and Family Community Gatherings after a 4-year hiatus related to the pandemic.
- Collaborated with the City of New Haven to launch a new initiative, Elm City COMPASS, that creates a system of compassionate, culturally informed supports for persons experiencing behavioral health crises.

Office of the Commissioner.

The Office of the Commissioner supports overall agency operations and administration, as well as provides or funds direct services for specialty populations. In addition to the Commissioner and Deputy Commissioner, DMHAS is led by a 7-member core senior leadership team that is strategically comprised of diverse subject matter experts with extensive experience in health care, operations, and government service.

Office of the Commissioner: Operation and Administration

Outside of the provision or funding of direct behavioral health care services, core agency functions that ensure efficient and streamlined operations include Legal Services, Human Resources, Public Information and Communications, Compliance, Policy and Governmental Affairs, Fiscal, and Data & Quality.

Legal Services. The Legal Division is responsible for providing in-house legal counsel to the Office of the Commissioner as well as all DMHAS facilities across the State of Connecticut. The Legal Division provides numerous legal services to the Department, including but not limited to: providing research and legal guidance to the Commissioner/division heads/employees related to the complex and multi-disciplinary issues arising from the implementation of the Department's core mission; representing the Department before administrative bodies; participating in complex case litigation with the Office of the Attorney General; reviewing and/or drafting agreements/contracts on behalf of the Department; investigating and evaluating issues related to healthcare compliance; and conducting policy review and development. The Legal Division also acts as the Department's Freedom of Information (FOI) office, handling compliance with FOI requests.

Human Resources. Overseen by the Chief Administrative Officer, Human Resources is comprised of four units: Safety Services, Office of Workforce Development, Office of Equal Employment and Opportunity, and the Office of Multicultural Health Equity. Safety Services is DMHAS' police force which includes approximately 70 sworn officers, augmented by building and grounds patrol officers, dispatchers, and other civilian support staff. In a recovery-oriented healthcare service agency, the DMHAS Police provide quality services through traditional law enforcement functions and safety and security management activities which are critical to maintaining compliance required for the Joint Commission on Accreditation of Healthcare Organizations (JCAHO) and other regulatory entities (HCFA/CMS). The Office of Workforce Development is responsible for education and training of staff providing direct service to clients and offered 75 instructor-led and 17 virtual trainings, and, in all, over 1,324 training completions. In addition, the 113 web-based trainings had a total of 22,466 completions. The Office of Equal Employment



and Opportunity is responsible for monitoring and ensuring the proper implementation of policies and procedures related to equal employment opportunity, affirmative action, and the Americans with Disabilities Act, and helps ensure compliance with applicable federal, state, and local laws. The Office of Multicultural Health Equity functions to enhance the delivery of DMHAS services for mental health and substance use disorders in a way that acknowledges the impact of individual differences on client treatment, and to assure that cultural competence is an integral quality of all DMHAS services.

Public Information and Communications. The Office of Public Information and Communications provides a full range of communication activities that serve the department and its stakeholders. The office manages public information, social media, media relations, marketing communications, issues management and public affairs, the agency's website, and internal communications. The Office of Public Information and Communications responds to inquiries from the public and media, as well as develops messaging and materials to agency staff. The office works with media outlets and reporters to provide accurate information in a timely manner; promote agency services, programs and events; disseminate media advisories, press releases and other materials to media partners statewide; and work to destigmatize mental illness and addiction."

Compliance. The Compliance Division engages in proactive tasks to prevent fraud, waste, abuse and/or exploitation within DMHAS and its facilities. Included in this responsibility is the active, ongoing process to ensure that legal, ethical, and professional standards are met and communicated throughout the entire healthcare organization. From the patients' perspective, the Compliance Division ensures that their information will remain confidential and secure. Patients are more likely to disclose information about themselves knowing their information is respected, confidential and secure. This in turn, can result in more accurate diagnoses and treatment plans, better patient outcomes and patients are more likely to comply with their treatment plans resulting in fewer avoidable hospital visits, lower readmissions, and reduction of costs for healthcare.

Policy and Governmental Affairs. The Policy and Governmental Affairs Division leads the development and implementation of the Commissioner's policy agenda; coordinates with senior team members on strategic initiatives and agency priorities; promotes and facilitates interagency collaboration and coordination; and is a thought partner on best practices for prevention, service delivery, integration of care, funding mechanisms, and other innovations. This division acts as chief advisor on legislative process and includes the Senior Legislative Advisor, who is the lead representative and liaison of the agency to the General Assembly, lobbyists, external stakeholders, the Governor's Office, and executive branch agencies. Major governmental relations responsibilities include: representing the agency in bill negotiations; tracking and monitoring external stakeholder bodies for major issues and upcoming trends that may impact the department; following the progress of critical bills and keeping relevant agency staff informed on appropriate developments; reviewing and analyzing statutes, legislation, and regulations affecting the operation, procedures and policies of a department for fiscal, policy, and operational impact; maintaining relationships with counterparts in other departments, legislative committees and other stakeholders to coordinate legislative initiative, keep informed of developments, or to provide expertise in the area of legislation/regulations; proactively coordinating resolution and response to legislative inquiries or concerns; and tracking and coordinating implementation of new statutory requirements.

Fiscal. The Fiscal Division provides the following core functions in support of DMHAS operations.

Contract Administration. Conducting 5 RFPs and 200 contract renewals for FY 2024, this unit provides oversight and management of all contracts with DMHAS providers including Human Service Contracts, Personal Service Agreements, Memoranda of Understanding, Memoranda of Agreement, student placements, and property lease agreements. Responsibilities include drafting and coordinating the review



and approval of contract language, processing provider funding applications, executing contracts, and reviewing provider financial reports.

Healthcare Finance. This unit is responsible for rate setting on behalf of Medicaid for the following services provided by DMHAS: Targeted Case Management (TCM); Behavioral Health Homes (BHH); Inpatient (IP); Outpatient (OP); and Medicaid Rehab Option (MRO). The team also performs analysis and/or allocation of contract funding for special projects and services, which include the 1115 SUD Demonstration, mobile crisis, residential (IP) services, recovery houses, and OTP at the Skilled Nursing Facilities. The unit also has oversight of the Yale Staffing Contract and Administrative Services Organization (ASO) contracts with Carelon and Advanced Behavioral Health (ABH), from a financial perspective.

Fiscal Services and Payroll. This unit is responsible for fiscal and administrative support services to all DMHAS state-operated facilities. These services include purchasing, accounts payable, asset management, and travel reimbursement. During FY 2024, DMHAS issued 2,544 purchase orders in the amount of \$606,980,763; processed 48,884 payments in the amount of \$635,236,016; and maintained an inventory of 6,690 items with a value of \$181,345,318. In addition, this unit is responsible for providing a full range of payroll and benefit services to approximately 3,300 bargaining unit, confidential, and managerial employees at all DMHAS locations throughout the state.

Budget and Accounting and Federal Grants. This unit is responsible for budgeting, forecasting, monitoring and reporting for 22 general fund SID accounts that amount to over \$830K, as well as numerous restricted SIDs and the federal HUD and PATH accounts. This unit is also responsible for managing federal grants throughout the life cycle of the grant from application to close-out and successfully managed \$104M in federal grants over FY 2024. Additionally, the unit manages other funds including the Opioid Settlement Fund.

Billing and Revenue Enhancement. This unit is responsible for submitting billable services to the Department of Administrative Services for claims processing including Targeted Case Management (TCM), Behavioral Health Homes (BHH), Outpatient, and Inpatient services for DMHAS-operated facilities. This unit also bills TCM and BHH services for DMHAS contracted private providers. The Billing and Revenue Enhancement unit oversees reenrollment of licensed staff and DMHAS-operated facilities in Medicare and Medicaid and monitors for timely submission of service authorization requests from payors. The unit provides analysis and monitoring for Connecticut Valley Hospital under the 1115 Substance Use Disorder Demonstration, is responsible for developing revenue projections for the Department, and serves as fiscal liaison to the Electronic Health record initiative for DMHAS.

Engineering and Capital Projects. This unit is responsible for the technical oversight of facility project design and management across the department. They are responsible for capital planning, facility support, coordination with other agencies, and code compliance across DMHAS sites. The Engineering Services section supports DMHAS sites in maintaining the infrastructure required to provide quality care to its clients.

Fiscal FY 2024 Improvements/Achievements

- Revenue Maximization. Generated an estimated \$319M in gross federal revenue to the state; supported Substance Abuse Disorder Medicaid 1115 Waiver with contract funding analysis, utilization monitoring, and state operated billing of approximately \$43M in gross Medicaid revenue; and expanded scope of state operated billing to increase federal revenue by an estimated \$4.0M.



- Contracting Efficiencies. Implemented and updated templated contract language to improve contracting efficiencies.
- Provider Support. Implemented on-line training for time study participants to improve operational efficiencies and reduce administrative burden on contracted providers; processed nearly 50,000 payments to vendors totaling over \$635M.
- Infrastructure Investment. Secured and executed over \$15M in Bond funds for critical infrastructure improvements along with maintenance and repairs across the DMHAS service system.

Data & Quality. The Data and Quality Division, led by the Chief Quality and Data Officer, is comprised of Evaluation Quality Management and Improvement (EQMI), Health Information Technology (HIT), Information Technology (IT), and Disaster Behavioral Health Response Network (DBHRN). The Chief Quality and Data Officer also serves as the Agency's Data Officer, representing DMHAS in all inter-agency data workgroups and projects, and the coordinator of any DMHAS-wide quality improvement committees or initiatives

Evaluation, Quality Management and Improvement (EQMI). EQMI is responsible for working with all eight DMHAS-operated facilities and all DMHAS-funded private non-profit providers to collect an administrative data set (client and program level clinical, utilization and, outcome data), critical incident report data and consumer satisfaction data that are used for various behavioral health care analytic products. EQMI is also responsible for the state-wide planning, administration and monitoring of the SAMHSA Block Grant program.

Health Information Technology (HIT). HIT is responsible for all activities related to the development, implementation and maintenance of the new electronic health record. The HIT Steering Committee is made of up directors and senior managers representative from various disciplines across the agency. The Committee is responsible for the monitoring of all IT projects that impact the state-operated facilities and PNP network.

Information Technology (IT). IT is comprised of employees of DAS, but work in service of DMHAS. The DMHAS IT Customer Success Manager (CSM) has a dotted line reporting structure to the DMHAS Chief Quality and Data Officer.

Disaster Behavioral Health Response Network (DBHRN). DBHRN is a volunteer emergency response team comprised of behavioral health professionals serving any Connecticut towns / municipalities that experienced a natural or human-made disaster and local capacity to respond has been exceeded. DBHRN is written in state legislation as a state asset that must be activated by the Governor's Office and/or the Department of Emergency Management and Homeland Security.

FY 2024 Improvements/Achievements

- Data Visualization: Transition from Tableau to PowerBI. Optimized data visualization and dashboard capabilities by implementing PowerBI and instituting a standing workgroup to move DMHAS to a system-wide platform.
- Sharepoint. Launched SharePoint as a platform for facilities to upgrade from their former intranet sites to SharePoint as a mechanism to communicate with all staff, and instituted a Sharepoint Governance Committee to develop guidelines and parameters around appropriate usage and provide ongoing monitoring.
- Updated Annual Statistical Report (ASR). Revamped the ASR, which includes utilization and outcomes data for DMHAS services within a given fiscal year, using Viseo to create data visualizations to produce more engaging information to a broader audience.



- Electronic Communications with Clients. Updated policy and technology to allow DMHAS state-operated facility staff to communicate with clients via an electronic platform (e-mail and text).

Office of the Commissioner: Program Divisions

Program divisions within the Office of the Commissioner offer direct programming, contract oversight, evaluation, and clinical support to a continuum of behavioral health services across the state. Divisions include: Community Services; Managed Services; Medical Director's Office; Opioid Services; Prevention and Health Promotion; Office of Recovery Community Affairs; Research; Statewide Services; and Young Adult Services.

Community Services. The Community Services Division (CSD) oversees many of the Department's contracted services and is comprised of two main teams, the Regional Services Team and the Evidence-Based Practices & Grants team. In addition to these two teams, CSD maintains the department's two real-time bed availability websites, facilitating access to many inpatient and residential program; oversees the DMHAS-funded Access Line, which answers callers 24/7, answers their questions about substance use services and makes referrals and connections to services; and staffs a small outpatient program at the state Department of Veteran's Affairs to treat active-duty personnel and veterans with substance use disorders.

Regional Services. The Regional Services team oversees DMHAS-funded substance use services (e.g., withdrawal management, residential treatment, recovery houses, case management, outpatient, methadone) and group homes. The oversight role includes on-site monitoring, facilitation of learning collaboratives for each level of care, implementation of new programs, and contract/budget review and changes along with DMHAS' Fiscal department. The Director of the Regional Services team is CT's State Opioid Treatment Authority (SOTA), serving as the state's liaison to the federal Substance Abuse and Mental Health Services Administration (SAMHSA) on methadone matters.

Evidence-Based Practices & Grants (EBP). The EBP team manages many DMHAS-funded mental health services (e.g., mobile crisis, peer respite, community support program (CSP), assertive community treatment (ACT), supported employment, supported education, social rehabilitation, outpatient, case management, respite). The EBP team also oversees the contract with United Way for 988 services. They provide onsite monitoring, learning collaboratives, implementation of new services and contract/budget reviews. The Director of the EBP team is DMHAS' point person for federal grants, coordinating a variety of activities, including development of grant applications, submissions and post-award submissions.

CSD FY 2024 Improvements/Achievements

- Ensured rapid response to callers in need through CT's 988 call center, with one of the top time-to-answer rates in the country.
- Conducted two RFP processes and helped implement the state's first Peer Respite program and the state's first 23-hour crisis stabilization program for adults.
- Collaborated with other state partners (DPH, DSS, DCP) to develop the state's procedures to implement mobile methadone units.
- Conducted an RFP to select two vendors to implement the first mental health peer program in emergency departments (EDs), to better respond to adults seeking mental health care at the EDs.

Managed Services. The Managed Services Division (MSD) oversees statewide programs which provide behavioral health treatment, integrated whole-person care, and recovery support services to eligible individuals. Managed Services staff work closely with the Department's contracted Administrative



Services Organizations (ASOs) to ensure eligible individuals have access to appropriate services and supports based on their strengths and needs. The division currently oversees the following initiatives for the agency:

Behavioral Health Homes (BHH): BHH is a healthcare service delivery model focused on the integration of primary care, mental health services, and social services and supports for adults and children diagnosed with mental illness using a multidisciplinary team and reimbursed by Medicaid. There are currently 14 Behavioral Health Homes in operation across the State of Connecticut.

Behavioral Health Recovery Program (BHRP): BHRP provides eligible participants with a continuum of clinical and basic recovery support services. During FY 2024, over 3,000 individuals received basic need assistance (e.g. clothing and toiletries); over 2,600 individuals received food assistance; approximately 300 individuals were provided with independent housing supports; approximately 100 individuals received security deposit assistance; over 1,600 individuals received Supportive Recovery Housing Services and an additional 45 beds were added to this system statewide; and over 2500 individuals were provided transportation assistance. Intensive Case Management services designed to provide support and engagement for individuals with complex needs related to substance abuse and/or behavioral health disorder(s) are also available through this initiative. The Behavioral Health Recovery Program is administered by one of the state's administrative service organizations.

Connecticut Behavioral Health Partnership (CTBHP): The CTBHP is a working collaborative between DMHAS, the Department of Children and Families (DCF), and the Department of Social Services (DSS); operated by an administrative services organization; and also has a legislatively mandated Oversight Council. The CTBHP is designed to create and provide timely access to an integrated, high quality behavioral health service system for Connecticut's Medicaid populations, including Husky A, B, C (Aged, Blind and Disabled) and D (Low Income Adults).

Military Support Program (MSP): MSP provides an array of behavioral health services to Connecticut's veterans, citizen soldiers, and their family members. MSP clinicians are embedded within Guard Units affected by deployments. Embedded MSP clinicians are civilian clinicians who serve our citizen soldiers in the National Guard and their families. Unit members receive confidential support and assistance from their embedded clinician in accessing community support services. Connecticut is unique in that no other state in the country has established a program that embeds civilian clinicians within the National Guard Units at the Company level.

Targeted Case Management (TCM): TCM is a set of Medicaid-reimbursable services provided to a target population that helps clients gain access to needed medical, clinical, social, and educational services to improve the quality of their lives. In Connecticut, the TCM target population is defined as "individuals aged 18 and older with serious and chronic mental illness inclusive of individuals with substance use disorders and co-occurring mental illness."

1115 Substance Use Disorder Demonstration: In 2022, The State of Connecticut was approved for an 1115 Demonstration Medicaid Waiver for substance use disorder (SUD) inpatient and residential treatment for adults and children under a fee-for-service (FFS) structure. MSD serves as the project lead for DMHAS and, in collaboration with the Community and Statewide Services divisions, provides oversight of the provider certification and training requirements related to the Demonstration.

MSD FY 2024 Improvements/Achievement



- Optimized the BHH health assessment completion process, allowing providers to perform a completed assessment on 79% of individuals who were active for at least one day, the highest annual number since the beginning on the initiative.
- Applied for and was awarded the Governor's Challenge Crisis Intercept Mapping Academy Training, which will develop a tailored crisis intercept map for a designated community with a corresponding action plan to improve crisis care services for service members, veterans, and their families.
- Received a \$10 million federal grant designed promote and provide integrated, evidence-based medical and behavioral health care for adults with mental illness and co-occurring physical health conditions or chronic diseases, and for adults with substance use disorders; The participating sites in Waterbury and Bridgeport are both operational and began seeing patients associated with this grant in January 2024.
- Trained and onboarded 5 new employment providers for the transitional case management program resulting in 20 new program openings statewide.
- Certified, in partnership with the Department of Social Services, over 40 residential substance use treatment programs across the state for the 1115 waiver and provided over 1,000 virtual and in-person training slots for providers to learn the ASAM Criteria.

Medical Director's Office (MDO). The primary role of the MDO is to ensure the provision of quality care to individuals with mental health and substance use disorders commensurate with the national standards of care, and to oversee the coordination of care throughout our system. Care coordination includes facilitation of timely and efficient movement of patients from the hospitals into appropriate levels of care in the community, as well as monitoring, coordinating and encouraging the placement of individuals in the community in the least restrictive residential home commensurate with their need and in keeping with DMHAS' recovery-oriented model of care. The MDO also directly oversees the DMHAS Division of Forensic Services, and Infection Prevention Nurses across our facilities, and makes recommendations for policy change both within DMHAS and with outside agencies.

Inpatient Admissions, Transfers, and Discharges. The MDO is responsible for DMHAS admissions, transfers and discharges to the five state facilities with hospital levels of care, comprised of 536 beds for General Psychiatric, Forensics (WFH), Acquired Brain Injury (ABI), Young Adult Services (YAS), and Geriatric patients. The coordination of care also includes assisting with the transfer of individuals who wish to move from or to the state of Connecticut, including interstate and international transfers. The office coordinates with the US State Department to ensure the safe return of CT citizens living outside the US who develop serious psychiatric challenges. The office also serves as liaison to acute care hospitals across the state and other community providers and organizations.

Residential Programs. Additionally, the MDO oversees all residential programs funded with Discretionary Discharge Dollars which includes 278 residential beds across 43 programs. The office provides utilization management review of these programs, is responsible for referrals into them, and provides clinical consultation and administrative monitoring to the contracted agencies.

Utilization Management. A weekly statewide utilization management (UM) meeting is held to review upcoming discharges, including of forensically involved competency restoration and PSRB individuals, as well as civil patients. The weekly UM meeting also includes review of statewide bed vacancies in various residential level of care, and forensic, statewide, and long-term services reporting.

Clinical Case Conferences. In terms of provision of quality care, the MDO functions in an advisory role to clinical teams in all DMHAS facilities throughout the state and conducts statewide clinical case conferences for the management of complex individuals who may be residing in the community, hospitals, forensic



facilities or residential settings. The office supports and supervises DMHAS facility medical directors, as well as ensures adequate provision of care in DMHAS funded private non-profit organizations.

Forensic Services. Overseen by the MDO, the Division of Forensic Services implements and coordinates specialized evaluation and treatment services for individuals with serious mental illness and/or substance use disorders who become involved in the criminal justice system. The division's goals are to promote individuals' recovery, to prevent or limit criminal justice system involvement, to promote public safety, and to coordinate activities with other state and private agencies. Services within the Division span the continuum of the criminal justice system, from pre-booking to incarceration and return to the community.

MDO FY 2024 Improvements/Achievements

- Opened three new programs, adding an additional 12 beds, and expanded 3 other programs by 5 beds, allowing 113 individuals to be able to be discharged from long-term state hospitalizations.
- Supported the discharge of 442 clients, a 10% increase from FY 23 and a 22% increase from FY 22.
- Expanded the Enhanced Forensic Respite Bed (EFRB) program, which provides an alternative to the Competency to Stand Trial evaluation and restoration process, from 3 to 16 beds, and implemented a statewide referral process; personnel from any courthouse in the state can now refer patients for supportive residential treatment in the EFRB program, potentially diverting them from costly and restrictive inpatient Competency to Stand Trial services.
- Diverted 1,436 individuals from the criminal justice system and into behavioral health and/or substance use disorder treatment through jail diversion programs across the state
- Secured an additional 20 housing certificates to use with clients involved in the criminal justice system to provide permanent housing solutions for transitioning out of temporary living arrangements or returning to the community from incarceration, enhancing their potential for long-term success.

Opioid Services. The Opioid Services Division (OSD) was established in 2018 in response to the growing overdose crisis and to address immediate needs and expand State-wide opioid treatment, recovery support, harm reduction, outreach, engagement, and overdose prevention coverage with a focus on overdose deaths. DMHAS has secured funding from the federal government, including the State Opioid Response grant, and ensures that all opioid-related funding is coordinated. In partnership with numerous State and community-based organizations, DMHAS has launched a series of targeted responses intended to reduce the negative impact of opioid use on Connecticut citizens and communities. The division manages projects and initiatives that resulted from infusion of State Opioid Response grant funding as well as those approved by the Opioid Settlement Advisory Committee.

OSD FY 2024 Improvements/Achievements

- Expanded innovative services in the State, adding three and continuing to support original Harm Reduction Centers in municipalities with highest morbidity rates: Hartford, Waterbury, New Haven, and New London,
- Added outreach services via Peer Navigator Programs in two areas of the State.
- Distributed close to 60,000 naloxone kits (naloxone is a lifesaving, overdose reversal medication), exceeding the state saturation goal for the year.
- Hosted a successful and informative Harm Reduction Conference. The conference included four expert speakers from around the country, as well as two panel discussions, focused on addressing equity, and stigma, 390 individuals attended the conference: 263 in person and 127 virtually.



Prevention and Health Promotion. The Prevention and Health Promotion Division, through effective prevention services, works with communities, organizations and families to prevent early use of alcohol, tobacco and other drugs and to ensure Connecticut's youth, families and communities thrive. The division promotes implementation of evidence-based programs and strategies to reduce or prevent substance use that are grounded in public health. Major program components include:

Resource Links. The statewide resource links support the prevention programs statewide and include:

1. *Connecticut Clearinghouse*, the state's premier library and resource center for information on substance misuse and mental health disorders, prevention and health promotion, treatment and recovery, wellness and related topics;
2. *Governor's Prevention Partnership*, designed to change the attitudes and behaviors of Connecticut youths and adults toward substance through DMHAS's Youth Advisory Board and mentorship programs across the state;
3. *Regional Behavioral Health Action Organizations*, 5 regional resources that provide mental health and substance use program planning, training, advocacy, and resource development; administer Local Prevention Council grants to each town to build local capacity and develop and implement prevention activities; and lead the Regional Suicide Advisory Boards that support the overall vision of the Statewide CT Suicide Advisory Board and provide local and regional infrastructure for suicide prevention and response activities;
4. *Training and Technical Assistance Service Center*, provides training, technical assistance and learning resources to prevention professionals and offers tools, strategies, and products to build capacity to reduce risk factors and increase a community's protective factors; and
5. *Center for Evaluation and Statistics*, which is responsible for evaluation of all state prevention programming and also provides the framework to improve implementation of ongoing multicomponent programs.

Tobacco Prevention and Enforcement (TPEP). TPEP reduces youth access to tobacco, vape and nicotine products across the state. TPEP enforcement program performs thousands of unannounced tobacco compliance inspections annually. It also runs the *What You Do Matters* Campaign in partnership with Fox61 which utilizes video PSAs, web banners, and posters to remind retailers and the public that you must be 21 to purchase tobacco and vape products and everyone must show their ID.

Local Prevention Councils. Across the state, there are over 150 local prevention councils that provide primary prevention strategies at the municipal level to address alcohol, tobacco, and other drug use. With the support of chief elected officials, LPCs seek to increase public awareness of alcohol, tobacco, and substance use prevention and stimulate the development and implementation of local prevention activities primarily focused on youth.

Regional Suicide Advisory Boards (RSABs). These five Advisory Boards are managed by the Regional Behavioral Health Action Organizations and are funded through a coordinated effort between DMHAS and DCF to address suicide prevention, intervention and response across the lifespan guided by the CT Strategic Suicide Prevention Plan 2025. They report monthly to the CT Suicide Advisory Board on their various activities that include training and education, strategic planning and implementation support to various settings, presentations, data gathering and reporting, and postvention loss guidance.

The Prevention division also utilizes SAMHSA's Strategic Prevention Framework (SPF), a comprehensive approach made up of five steps and two guiding principles to facilitate addressing substance misuse and related behavioral health problems in communities. Specifically, the Partnerships for Success Initiative, and the Prevention in Connecticut Communities initiative incorporate SPF as they focus on underage drinking and vaping prevention.



Prevention FY 2024 Improvements/Achievements

- Engaged in a Connecticut Healthy Campus Initiative in which 14 college campuses engaged over 24,000 students on opioid dangers, naloxone administration, safe storage, and disposal, and provided resources to support student mental health.
- Coordinated with the Fatherhood Prevention Initiative, which engaged over 800 black, non-Hispanic men (representing the population most at risk for opioid overdose in the state) by providing information and resources about substance use, opioids, mental health, and communication with their children.
- Received a \$4.25 million, 5-year Prescription Drug Overdose Grant from SAMHSA with focus on providing first responders with the tools and resources they need to respond to overdose calls.
- Received a Graphic Design USA Digital Design 2023 Award through the launch of the “Be in The Know Campaign” which provides tailored messaging to target audiences on understanding the signs of cannabis dependency while offering support and resources; messaging appeared in CT more than 224 million times, had over 355,000 page views on the website, and 3 million social engagements in English and Spanish.
- Recognized over 30 organizations across the state as a Recovery Friendly Workplace through an interagency initiative that partners with employers to help address mental health and substance use challenges facing the workforce by promoting health, safety, and wellness.
- Collaborated with the Connecticut Clearinghouse, UConn Athletics, and the Connecticut Interscholastic Athletic Conference to bring science driven prevention education to high school and college athletes, coaches, and parents, including messaging around the importance of understanding the dangers of opioid use and the importance of safe storage and disposal and a training video to educate coaches and high school athletes on substance use as well as promoting mental health wellbeing.
- Connected over 50,000 individuals to information on substance use prevention and mental health through the Change the Script Campaign’s mobile resource van that attends events statewide.

Office of Recovery Community Affairs (oRCA). oRCA represents DMHAS statewide to ensure meaningful contact, input, and dialogue with the diverse representatives within the recovery community. oRCA promotes recovery and wellness throughout all health service fields and the public, educating and promoting SAMHSA’ definition of recovery, recovery peer support, multiple pathways for recovery, and harm reduction. The Director of oRCA attends monthly meetings with SAMHSA’s Regional Division, and the National Association of State Mental Health Program Directors, Division of Recovery Support Services subcommittee (NASMHPD-DRSS) to ensure CT is updated and involved with National Recovery strategies and policies.

oRCA FY 2024 Improvements/Achievements

- Made significant progress, in partnership with Yale-PRCH and the Peer Workers community, in developing a single Peer Support Workers Certification with credentialing through the Connecticut Certification Board (CCB with a goal to pilot test in February 2025.
- In partnership with the Prevention and Health Promotion Division, Wheeler Clearinghouse and the RBHAOs, held five Recovery Recognition Events to highlight September Recovery Month.
- Launched a Recovery Media Campaign to promote Recovery in CT and decrease Stigma(www.Recoveryhappensherect.org) which included daily postings on Facebook, Twitter and Instagram; people shared their recovery story, giving hope and strength to others by demonstrating that recovery is possible.
- Engaged in the Connecticut United Initiative to identify needs and barriers to obtain and sustain recovery, utilizing a grassroots approach; created a map of recovery services, developed a



survey based on SAMHSAs' four dimensions of Recovery (Health, Home, Community, and Purpose); and held open forums; this first-hand information will allow the oRCA Lived-Experience Leadership Committee to develop a three-year strategic plan.

Research Division (RD). RD was created over 30 years ago through a unique arrangement with the University of Connecticut (UCONN), in which RD personnel are hired through UCONN as research faculty and professional staff in the School of Social Work, and collectively serve as a DMHAS unit under a Memorandum of Agreement. RD is a nationally recognized leader among state mental health and substance abuse agencies in services and applied research, and serves DMHAS through researching specific questions or content areas, assisting with grant identification and development, applying for research grants of value to DMHAS, and evaluating DMHAS programs. The Research Director also assists with reviewing research applications from outside investigators who want to conduct research within the DMHAS system. RD is almost entirely funded with grant and contract funds from state, federal and non-profit sources. This division has the capacity to design and conduct program evaluations, cost effectiveness studies, large administrative database merges and analyses, fidelity monitoring, implementation research, randomized clinical trials, training in various clinical and organizational interventions, and investigates many issues of policy relevance in the mental health and addictions fields. The RD also conducts literature reviews, internet research, , creates presentations, reports, scholarly publications, pamphlets and handouts for various target audiences on multiple topics. Research conducted by the RD informs decision-makers about the effectiveness of treatment and the impact of policies on persons with behavioral health disorders.

RD FY 2024 Improvements/Achievements:

- Applied for and received several SAMHSA grants with DMHAS, including for 988 Capacity Improvement, Promoting the Integration of Primary and Behavioral Health Care (PIP-BHC), and State Pilot Program for Pregnant and Parenting Women (PPW/PROUD).
- Planned evaluations for 2 new crisis respite pilot programs – Peer Respite at The Gloria House in New Haven, and 23-Hour REST program in New Britain.

Statewide Services. The Statewide Services (SWS) division consists of a group of professionals who oversee very specific programs and services designed to meet the diverse and often unique needs of clients, or potential clients, around the state. The division responds to issues related to aging, housing and homelessness, , special education, nursing home diversion, transition and placement, acquired brain injury, problem gambling, surviving trauma, and pregnant or parenting people. Statewide Services consists of Housing and Homelessness Services, Long-term Services and Supports, State School Unit, Women's and Children's Services, and a Gambling Unit.

Housing and Homelessness Services. Housing and Homelessness Services focuses on enhancing housing stability for persons with behavioral health disorders. This unit supports various community-based outreach and engagement programs to connect the most vulnerable populations with care and housing, including Projects for Assistance in Transition from Homelessness (PATH) programs, DMHAS-operated homeless outreach, and Transit Homeless Outreach Program (T-HOP), a unique collaboration with the Department of Transportation and the Department of Emergency Services and Public Protection that enables staff to be made available at transit stations in the evening hours. This unit also funds SOAR (SSI/SSDI Outreach, Access, and Recovery) specialists to employ a model used to assist eligible individuals with disabilities to apply for and access SSI/SSDI benefits. Finally, for over 25 years, DMHAS has partnered with DOH and previously DSS to develop and implement Permanent Supportive Housing – an evidence-based model - across CT. Together, the state agencies provide for in-home wrap-around services and rental subsidies to individuals and families who are experiencing homelessness and are diagnosed with a behavioral health disorder.



Long-Term Services and Supports. This unit oversees the DMHAS components of the Acquired Brain Injury (ABI Waiver) and Mental Health (MH) Waiver. It also manages the Nursing Home Diversion and Transition Program (NHDTP), which funds nurse clinicians and case managers to work directly with community providers, nursing home staff, and hospital discharge planners to ensure the placement of individuals with severe mental illness (SMI) in the least restrictive setting. The oversight of 60 West, a privately owned skilled nursing facility in Rocky Hill that serves behaviorally complex, criminal justice involved residents, is also conducted by this unit. Finally, the Senior Outreach and Engagement program provides assessments and case management services to at risk older adults (55+) by utilizing proactive approaches to identify, engage and refer seniors for various individually tailored community treatment options.

Women's and Children's Services. These services focus on the unique needs of women and families affected by substance use and co-occurring disorders. Funded programs include five (5) specialized substance use residential programs located statewide for pregnant and parenting people that allow infants and children to reside with their parents in the program; two (2) Women's Recovery Support programs providing community residences for pregnant and parenting people in recovery also allowing infants and children to reside with their parents; PROUD (Parents Recovering from Opioid Use Disorders) treatment and recovery services provided in the office, home and community settings; LGBTQIA+ learning collaborative and trainings; Women's REACH (Recovery, Engagement, Access, Coaching & Healing) program that provides statewide integration of 15 recovery navigators (all staff are persons with lived experience); Substance Exposed Pregnancy Initiative of CT (SEPI-CT), led by sister agency and private non-profit stakeholders and guided by a five year strategic plan with the goal to improve the safety, health, and well-being of substance exposed infants and support the recovery of pregnant and parenting people and their families; ACCESS Mental Health for Moms, a consultative perinatal psychiatry service that is available to Connecticut practitioners who are providing healthcare to pregnant and post-partum people presenting with mental health and substance use concerns irrespective of insurance coverage; and a continuum of other residential programs across the state. The Women and Children's Services team oversees DMHAS-funded gender specific (women) substance use services including residential treatment, recovery houses, case management, outpatient, and intensive outpatient services. The oversight includes on-site monitoring, coordination and training with healthcare systems and facilitation of learning collaboratives and technical assistance for each level of care, implementation of new programs, and contract/budget review and changes along with DMHAS' Fiscal department.

Problem Gambling Services. This unit oversees state contracts for problem gambling prevention, treatment, and integrated services, with a goal of fostering an environment throughout the state that promotes informed choices around gambling behavior.

State School Unit. DMHAS is required by law to provide special education and related services to eligible students between 18 and 22 years of age who are currently residing in a DMHAS inpatient facility. DMHAS inpatient facilities are located in Hartford, Middletown, Norwich, New Haven, and Bridgeport.

SWS FY 2024 Improvements/Achievements

- Awarded federal Department of Housing and Urban Development (HUD) 3-year demonstration funding for outreach and supportive housing services specifically to serve unsheltered populations through the Balance of State (BOS) Continuum of Care.
- Streamlined SOAR process in partnership with the Social Security Administration, allowing for 32 SOAR applications to be approved statewide, with a 60% approval rate for initial applications (the national approval rate for non-SOAR assisted applications is 30%).
- During the first two quarters of FY 2024, T-HOP outreach workers engaged with over 200 people.



- Awarded a second three-year cycle of the SAMHSA PPW award to continue PROUD treatment and recovery services and expand its efforts to the greater New Haven and Bridgeport areas.
- Long Term Services and Supports staff worked in coordination with the Department of Public Health (DPH) and Healthcentric Advisors, a private non-profit quality improvement consulting organization to develop a toolkit and training series that will support nursing home staff capacity to manage individuals with Opioid Use and related substance use and mental health disorders.
- Conducted two requests for proposals (RFP's), one pertaining to a statewide specialty recovery program in the women and children's services unit and the other pertaining to a statewide service managed by the housing and homeless services unit.
- Hosted 2 specialty population conferences (1 focusing on the LGBTQIA+ community and the other focusing on recovery interventions for Pregnant and Postpartum people affected by substance use and mental health).

Young Adult Services (YAS). The YAS program was established to facilitate the successful transition of young adults from the Department of Children & Families (DCF) to the adult mental health system and facilitate acquisition of the necessary skills for adulthood. DMHAS YAS currently has MOAs with the Department of Children and Families (DCF), the Court Support Services Division (CSSD), and the state's behavioral health administrative services organization (ASO) to facilitate early engagement, referral, assessment, and transition planning for youth and young adults as early as age 16. Other referral sources include Department of Corrections (DOC), school systems, hospitals, community providers, and self-referrals through the DMHAS Local Mental Health Authorities (LMHAs). The current population served by YAS includes the most acute, high-risk cohort of young adults in the state between the ages of 18 and 25. In FY 2024, YAS served 1245 young adults in state, 285 of which were served in in-state community-based state-operated and private non-profit residential programs.

The service system consists of 18 community-based age-specific programs at state-operated and private non-profit LMHAs across the state of Connecticut which provide intensive, individualized wraparound interventions within an array of milieus. Services include treatment in community based specialized residential programs, supervised apartments, and supported housing, as well as outpatient and recovery support services such as behavioral planning, case management, psychiatric and clinical services, medication management, educational and vocational support, coaching, peer support, and perinatal support services for pregnant and parenting young adults. YAS also funds a 17-bed inpatient unit at CVH. In addition, there are out-of-state contracted private non-profit residential sites providing specialized services not available in CT.

YAS FY 2024 Improvements/Achievements:

- Developed a six-module substance use treatment training program for statewide YAS staff that focuses on increasing skills and knowledge of trauma, harm reduction, and motivational interviewing, in the context of young adult development; offered this three hours/week, six-week training quarterly to all DMHAS staff in 2023-2024.
- Held the first DMHAS Human Anti-Trafficking (DHAT) retreat in April 2024 to identify short-term and long-term goals which include raising awareness of HT through training and Public Service Announcements and developing a screening/assessment tool and provided 15 trainings for approximately 333 individuals from DMHAS and the community.
- Finalized the outcomes at year four of a five-year CT Stay Strong federal grant to develop and implement an early intervention program for young people between the ages of 16 and 25 operated by the New Britain and East Hartford LMHAs, which demonstrated statistically



significant improvement in overall mental health ratings noted between baseline and six month follow up.

- Conducted the Young Adult Voice Initiative to increase young adult participation in all aspects and phases of service delivery by creating a practice that includes young adults as partners and decision makers serving on committees that determine policy, procedures, and program services, such as the statewide YAS Advisory Board and YAS Advisory Boards at each LMHA; engaged in survey tools to assess youth/young adult voice at the agency level and will use results to assist in informing a plan to strengthen youth voice in YAS and staff competencies in this area.