

MULTISYSTEMIC THERAPY FOR EMERGING ADULTS (MST-EA)

Multisystemic Therapy for Emerging Adults (MST-EA) was designed for young people aged 17-20 at the highest risk for negative outcomes – those with multiple co-occurring problems and extensive systems involvement. The Connecticut MST-EA program will serve youth between their 17th and 21st birthdays who (1) are aging out of foster care or involved in the child welfare system and (2) have a behavioral health condition(s) (i.e., serious mental health and/or substance use disorders). The model developers in Oregon will provide Quality Assurance for both MST-EA teams under a separate contract.

Target Population

MST-EA targets emerging adults who have a serious mental illness and/or substance use, and may have criminal justice involvement. Eligible young adults may also have a trauma history which can be addressed through the MST-EA treatment model. The young adult referred must be between their 17th and 21st birthdays; aging out of foster care or involved in the child welfare system; have a serious behavioral health condition(s) (i.e., mental health other than ADHD, Conduct Disorder, or ODD, and/or substance use disorders); stable housing or a plan to achieve stable housing; and DCF involvement at the time of referral. The young adult is also being referred to DMHAS for behavioral health services in the adult system. DCF Area Offices served include Milford, Bridgeport, Waterbury, New Britain, Hartford and Manchester.

Referral and Service Initiation

- DCF social workers will bring possible referrals to the RRG Gatekeeper for MST-EA. If the referral is appropriate, the Gatekeeper will then call the MST-EA supervisor directly.
- The Contractor will be available to accept assigned clients from referral sources Monday - Friday, 52 weeks per year during routine business hours. The Contractor will accept all clients who meet the inclusionary / exclusionary criteria for MST-EA.
- The initial visit with the young adult client by the MST-EA staff will include the clinical supervisor and MST-EA therapist, and will occur within 72 business hours of referral.

Caseload and Length of Service

Caseload = 4 per FTE clinician. The average length of service is 8 months.

The Contractor will provide:

- a minimum of 2 - 3 home visits per week.
- MST-EA services can be extended if DCF Office Director, DCF CO program manager, and the MST-EA QA consultant agree.

Services and Interventions

- a. treatment of both antisocial behavior & serious behavioral health conditions;
- b. engagement and development of the client's naturally occurring Social Network to facilitate sustainability of treatment changes;
- c. MST-EA coaches provided by the MST-EA Team, who serve as positive mentors and engage young adults in prosocial, skill building activities during and after their involvement with MST-EA;
- d. mental health, substance use, and trauma Interventions, including urine drug screens;
- e. sustainability planning for housing and independent living skills;
- f. development and planning for career goals;
- g. improvement of relationship skills;
- h. coordination of medical and psychiatric care
- i. parenting curriculum (for clients who are pregnant or have children);
- j. drug screening generally occurs 1 time per week, with more frequency if needed (i.e., the young adult has a child living with him/her or she is pregnant); and
- k. coordinate with psychiatric services in the community. Therapist supports young adult in accessing those services.

Crisis Response

Support to families in crisis on their active caseload occurs 24 hours per day, seven days a week including weekends and holidays by a MST-EA clinician who is on call after hours.