

Fiscal Year 2017 Program Report Card: Multidimensional Family Therapy (MDFT)

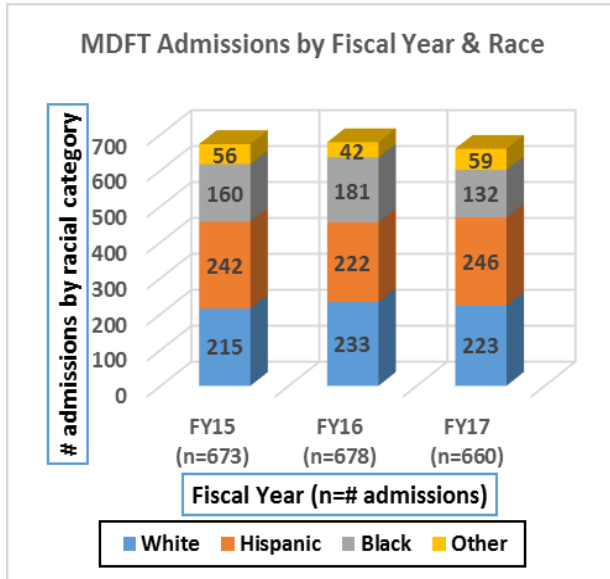
Quality of Life Result: Connecticut children grow up stable, safe, healthy, and ready to lead successful lives.

Contribution to the Result: MDFT is an evidence-based, family-focused, adolescent substance use treatment program, used as an alternative to residential treatment, and which utilizes individual, parent and family therapy to address the issues leading to adolescent substance abuse, behavioral & mental health problems.

Program Expenditures	State Funding	QA Funding	Total Funding	3 rd Party Reimbursement
Estimated SFY 17	\$9,095,079	\$774,225	\$9,869,304	For clinical & case management, psychiatric evaluations, & medication management.

Partners: youth, families, 13 providers, Advanced Behavioral Health for local MDFT QA, MDFT International for model developer QA, CSSD

How Much Did We Do?

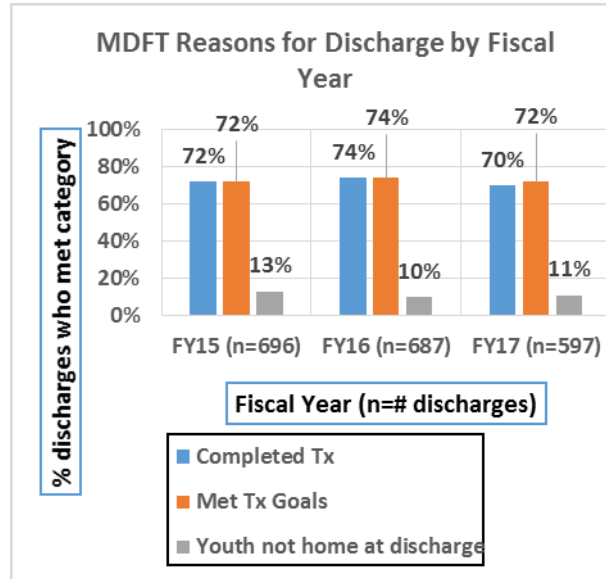


Story behind the baseline:

PIE Data: Clients self-identify their race/ethnicity at the time of intake. The trends for the racial breakout of admissions to MDFT has shown stability across these last 3 Fiscal Years. Most of the MDFT teams have at least 1 Spanish-speaking member, which may account for the consistently high # of referrals of Hispanic clients.

Trend: ▼ admissions

How Well Did We Do It?

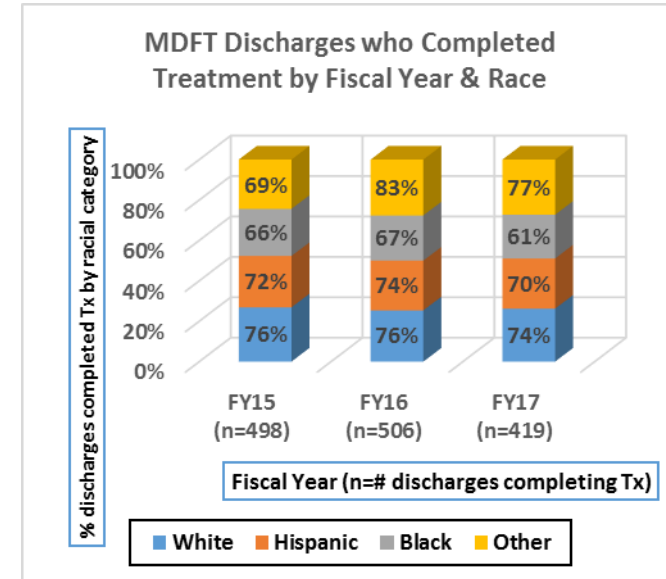


Story behind the baseline:

PIE Data: As shown in FY17, some families can meet their goals without completing a full course of MDFT. The data element “met treatment goals” was taken out of “reason for discharge”, & made its own data element in Sept., 2016. That is why the numbers are the same in FY 15 & 16 for these 2 variables, & are different in FY17 when this change occurred. The % of youth not at home (in residential placement, hospitalized, incarcerated or ran away) has remained fairly consistent across the 3 years.

Trend: ▼ for Completed Tx

How Well Did We Do It?



Story behind the baseline:

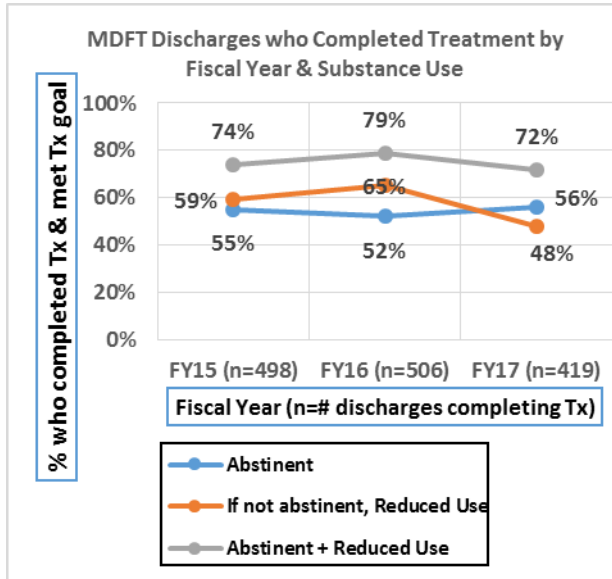
PIE Data: Although there were many new therapists & supervisors by the end of FY17, the racial proportions remained within range from previous Fiscal Years.

Trend: ◀▶

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Quality of Life Result: Connecticut children grow up stable, safe, healthy, and ready to lead successful lives.

Is Anyone Better Off?

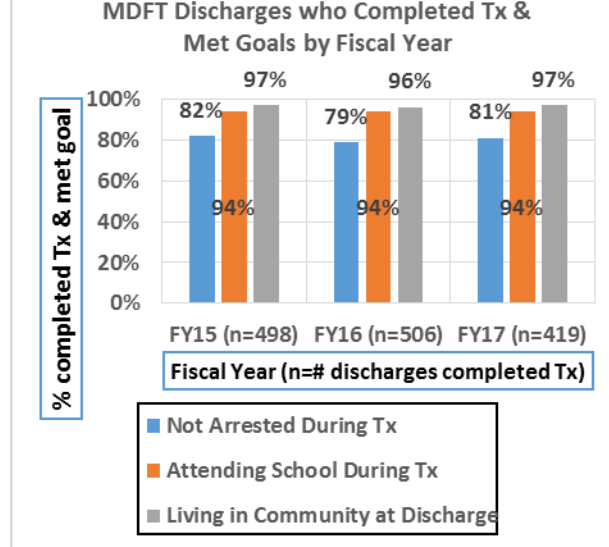


Story behind the baseline:

PIE Data: Since MDFT’s goal is “reduction of substance use” for their adolescent clients, “abstinent + reduced use” data element (the gray line) is the most accurate for this program. The decrease in FY17 is due to the influx of new therapists & supervisors who are becoming more experienced & proficient with the model. Addressing substance use is one of more difficult outcomes to change, & is helped by the QA support of ABH & administrative support in the provider agencies.

Trend: ▼ abstinent + reduced substance use

Is Anyone Better Off?



Story behind the baseline:

PIE Data: All 3 outcome measures significantly exceeded their targets in all 4 quarters: 75% target for “not arrested during Tx” & for “attending school during Tx”; 80% target for “living in community” at the time of discharge (includes private residence, foster home, college dormitory, & Job Corps).

Again, these outcomes are very high for clients who complete a course of MDFT treatment, even when the substance use outcome is lower.

Trend: ◀▶

Proposed Actions to Turn the Curve:

- The MDFT Workforce Development Committee of MDFT providers & ABH has conducted a “Stay Survey” & a time study to find ways of decreasing the # of resignations of MDFT therapists & supervisors, experienced generally by intensive in home models. Providers & ABH will implement within the next 3 months some of the incentives identified in the “Why do you stay in MDFT” surveys.
- The Committee is also looking at information from exit interviews done with staff who leave MDFT.
- DCF is working with providers, ABH & the model developer to develop a specialized program for adolescent opioid users & their families.

Data Development Agenda:

- Next annual assessment of staff gender, diversity, & languages spoken occurred on 7/1/17, with a report forthcoming.