FY27 PROGRAM DESCRIPTION
HAMHDS PROGRAM: MULTI-SYSTEMIC THERAPY
CARF PROGRAM: INTENSIVE FAMILY-BASED SERVICES

PHILOSOPHY OF PROGRAM
Multi-Systemic Therapy (MST) is a unique comprehensive treatment program designed to serve multi-problem youth. MST therapists focus on working with families to develop short-term, specific goals that help reduce risk factors that lead to juvenile delinquency by working with various systems in the youth's ecology. Treatment is family focused and community based.
In order to maintain youth in their homes, MST clinicians strive to engage families, build on strengths, leverage natural supports, and work with the systems in the youth and family's natural environment. MST services youth age 11-18 who are demonstrating chronic, violent, delinquent behavior and youth with serious emotional problems including truancy and academic problems, disobedience and disrespect, aggressive behavior, criminal behavior, drug and alcohol problems, running away, and/or parental challenges with managing youth's difficult behavior.
Our Core Values
Youth & Family services are:
Youth centered, family focused with strengths and needs of the family dictating the treatment provided
Provided within the context of the family and the community.
Provided with culturally competent programs, staff and services that are responsive to the diversity (culture, race, ethnicity, sexual orientation) of the individuals we serve
Guided by current research, best practice standards and professional ethics

DESCRIPTION OF SERVICES
Admission/Continued Stay/Exclusion Criteria:
The target population for this program is adolescents between the ages of 11 and 18 who are:
experiencing emotional and/or behavioral difficulties that are negatively impacting their functioning at home, in the community or at school; or,
who are being adversely impacted by alcohol or substance abuse; or,
who have previously been diagnosed with a mental health disorder but are in need of a more comprehensive array of services.

Youth who may be referred elsewhere for services are those:
who have a primary problem of intellectual disability;
whose primary problem is autism and they are non-verbal or unable to benefit from traditional mental health therapy.
Youth who present with Sexual Offending behaviors may be provided short term case management linking them to appropriate resources in the community such as Risk Assessment and Treatment with a Certified Sex Offender Treatment Specialist.

Services provided include:
Multi-Systemic Therapy
MST is an intensive, evidence-based treatment program provided in home and community settings for youth (11-17 years old) who have been referred by youth serving agencies related to clinical impairment in disruptive behavior, mood and/or substance use. MST includes an emphasis on engagement with the youth's family, caregivers and natural supports as well as professionals delivering interventions in the recovery environment. Focus is on empowering caregivers to establish and maintain positive changes in the youth's natural ecology. Typical length of service for MST is 4-5 months.

Location of Services	Hours & Days of Operation
10299 Woodman Rd., Glen Allen, VA 23060	Mon., Wed., & Fri. 8:30AM-5:00PM Tues. & Thurs. 8:30AM-9:00PM

The organization does not use Artificial Intelligence (AI) in service delivery or for health data analysis and processing.

CONTRACT SERVICES
No contractual services are provided within this program.

STAFFING
The MST team is comprised of a Supervisor and 4 licensed or license-eligible clinicians. All staff have completed MST Orientation training, participate in weekly consultation with an MST expert, and participate in quarterly Booster trainings. The psychiatrist is available for consultation for each child when the parent or legal guardian requests this service.

Services are provided in the community, including in the youth's residence. MST clinicians are on-call to their families 24/7. When assigned clinician is unavailable, a coverage plan is developed in coordination with the MST supervisor and families are given information how to access to HAMHDS Emergency Services and regional crisis resources.

PROGRAM GOALS
The goals of the Program are 1) to maximize individual functioning at home, in school, and in the community; and 2) to prevent out-of-home placements.

PROGRAM OBJECTIVES
On an annual basis the program will develop at least one measure in the following areas: efficiency, effectiveness, service, access, and satisfaction feedback from individuals receiving services and stakeholders. These measures consider three important factors quality, customer value and financial performance. See program specific performance improvement goals and objectives.

FEES
The identified payors/funding sources are as follows: Medicaid MCO's, Self-pay, State funds, Federal MH Block Grant funds, County funds.

Individuals complete a financial assessment at admission and at every change in insurance/income or every 5 years whichever comes first. Services are provided based on a sliding scale if needed. If an individual feels that they are unable to pay the fee assessed, a financial appeal can be completed. No one is turned away from services due to inability to pay. The charge per month for case management is $367.31. The majority payer-source is Medicaid.

PROCEDURES FOR REFERRAL, SCREENING, ADMISSION, AND RE-ADDMISSION
Interested parties including parents, guardians, and other agency representatives who are seeking services contact Access at 727-8515. They will be instructed to walk into our East and Woodman Road locations for the same day access (SDA) intake service. The hours of SDA at both locations are:
Monday- Wednesday 7:30am-3pm

Thursday 7:30am-5:30pm
Friday 7:30am-11am

All Youth and Family Services individuals initially meet with an SDA therapist who completes an assessment and begins talking with the family about service options (see list of services provided above). Determination about which service options are most appropriate are made upon consideration of input from the family and the clinical assessment. The program does not utilize a waitlist and makes every effort to offer an intake slot within 14 days of intake assessment.

ORIENTATION OF INDIVIDUALS TO THE PROGRAM
Individual staff members provide orientation to the program. Handouts and verbal explanations of services are utilized to ensure individual and family understanding of the program and the types of services offered. The individual and family's participation in the development of an Individual Service Plan also serves to ensure the individual and family's understanding of the range and type of services offered.

EMERGENCY CLINICAL CONSULTATION
Emergency Services staff members provide additional on-call coverage for individuals in coordination with the Youth and Family Services staff. When possible, a member of the Youth and Family Services staff will provide clinical consultation. If for some reason it is impossible to reach Program staff, the Emergency Services staff members provide this service. Emergency services are available 24 hours a day/7 days a week basis by calling 804-727-8484.

TELEHEALTH
The MST program prefers to provide direct service face-to-face, however if telehealth is necessary, the MST clinicians follow the agency telehealth policies.

MEDICATION MANAGEMENT
The Youth and Family Services Program does not provide medication management, medication monitoring or store medications for the individuals served.

SECLUSION/RESTRAINTS/EMERGENCY HOLDS
Seclusion and restraint are prohibited and are not used in any agency programs. Brief physical holds are used only by staff trained in Therapeutic Options in an emergency.

TRANSFER/DISCHARGE PROCEDURES
Individuals may be transferred from the unit when it is determined that the individual's needs exceed the resources in the program or when it is determined that the individual no longer meets the eligibility requirements for the program. Individuals are typically transferred to other units within the agency that are more apt to meet the individual's needs.

Individuals are discharged from the program:
at the request of the individual/family,
when the individual ages out of the program,
when the family moves out of the locality,
when the individual/family fail to participate in treatment,
when the individual meets criteria for treatment in a more restrictive environment and,
when the individual/family meet the goals and objectives of treatment.

In all of these situations, staff work to ensure that the individual and family are connected with appropriate resources after leaving the Program.