

Resources for People Using Substances

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Background

This resource was created for Outreach Programs working with people experiencing homelessness in Connecticut. It highlights resources available for people using substances, and includes, when available, eligibility criteria, links to additional information, and a brief description of what each resource provides.

Additional resources for PATH and other Outreach Programs can be found on the [CT BOS Resources](#) page. Please note that the CT BOS Team regularly updates and posts new materials to the website. If you encounter broken links and are unable to locate the information you need, please contact the CT BOS team at ctboscoc@gmail.com.

General:

[Connecticut Community for Addiction Recovery's \(CCAR's\) Recovery Coaching Program](#)

- [Emergency Department Program](#): Eligible population: Individuals with substance use related issues or their family members referred by a participating ED. Operates in 30 CT hospital Emergency Departments (EDs) noted in the Fact Sheet linked below. Recovery coaches are skilled professionals who meet with patients admitted to an ED resulting from opioid overdose or other substance-related crisis. They support patient, family members and hospital personnel, having demonstrated effectiveness in linking ED patients with treatment and community-based recovery services.
 - [Recovery Coaches Fact Sheet](#)
 - [Program Manager](#)
- Jail Diversion Program: Eligible population: Individuals with justice involvement in the designated areas. Works with DMHAS Jail Diversion programs in Bridgeport, Hartford and Waterbury.
 - [Program Manager](#)
- Manchester/HOPE Initiative: Eligible population: Individuals with substance use related issues referred by the Manchester PD. Partners with Manchester and the HOPE Initiative to provide recovery coaching to people experiencing substance or alcohol use disorder, and have had recent contact with police or emergency services.
 - [Program Manager](#)

[Connecticut Outpatient Behavioral Health Enhanced Care Clinics \(ECC\) Map and Table](#)

- Enables users to hover over a location on a map to view information on each ECC location including addresses, phone numbers and ages served.

[Medications for Addiction Treatment \(MAT\)](#)

- Connecticut Behavioral Health Partnership (BHP) webpage with MAT providers and provider resources for substance use and addiction
- MAT Vans: DMHAS also funds 5 Mobile MAT vans around the state – one for each DMHAS region. Mobile MAT vans are staffed by a nurse or physician and a peer recovery support counselor. Services include: prescription for Suboxone, peer counseling, Naloxone and other harm reduction supplies, referral to treatment center, and transportation to a pharmacy, if needed to fill prescription
 - Region 1 – Liberation Programs - [Mobile Outreach Van – Liberation Programs](#)
 - Region 2 – Bridges - [Mobile Addiction Treatment Team - Bridges Healthcare \(bridgesct.org\)](#)
 - Region 3 – Perception Programs - [Changing Peer-Ceptions Blog #1 Introducing the Mobile MAT \(van\) Program - Perception Programs, Inc](#)
 - Region 4 – CT Harm Reduction Alliance - [SSP Listing – Connecticut Harm Reduction Alliance \(ghhrc.org\)](#)

- Region 5 – McCall Center- [Outreach Services - McCall Behavioral Health Network \(mccallbhn.org\)](https://mccallbhn.org)

[DMHAS Addiction Services Bed Availability](#): contains bed availability for the following types of services, including city, phone, open # of beds and the specific time bed was available:

- [Withdrawal Management \(detox\)](#) – Eligible population: people requiring medical evaluation and medical monitoring and withdrawal management. Contains links for individual treatment centers and discusses insurances accepted, including any pre-authorization requirement and in or out of network issues.
 - **Medically managed withdrawal management (4.2)** is provided in a private freestanding psychiatric hospital, general hospital or state-operated facility. It is medically directed treatment of a substance use disorder where the individual’s admission is the result of a serious or dangerous substance dependence requiring a medical evaluation and 24/7 medical withdrawal management. For individuals with co-occurring mental health disorders, psychiatric assessment and management is available.
 - **Medically Monitored withdrawal management (3.7D)** is provided in a residential facility licensed by the Dept. of Public Health to offer residential detoxification and evaluation, involving treatment of substance use dependence when 24-hour medical and nursing oversight is required. Comprehensive evaluations and withdrawal management are provided as short-term counseling and referral to other supports.
- [Residential Treatment](#) - Eligible population: individuals with substance use or co-occurring substance use and mental health disorders requiring structured (varying degrees) rehabilitation program. Contains links for individual treatment centers and discusses insurances accepted, including any pre-authorization requirement and in or out of network issues
 - **Intensive Residential Treatment (3.7)** for substance dependence or co-occurring disorders is a residential service provided in a facility licensed by the Dept. of Public Health to offer an intensive residential treatment, or in a state-operated facility. These services are provided in a 24-hour setting and are intended to treat individuals with substance use or co-occurring disorders who require an intensive rehabilitation program. Services are provided within a 15 to 30 day period and include assessment, medical and psychiatric evaluation if indicated, and an intensive regimen of treatment modalities including individual and family therapy, specialty groups, psychosocial education, orientation to AA or similar support groups, and instruction in relapse prevention.
 - **Intensive Residential Co-Occurring Enhanced (3.7E)** services are provided in accordance with requirements designated by the Department to individuals with severe co-occurring substance use and mental health disorders who require integrated intensive rehabilitation services.
 - **Intermediate Residential (3.5)** service is a service provided in a facility licensed by the Department of Public Health to offer intermediate treatment. These services are provided in a 24-hour residential program that provides counseling and other rehabilitative services in a structured environment. These residential services are intended to address significant problems with behavior and functioning in major life areas due to a substance use disorder with the goal of community re-integration. A minimum of twenty hours per week of addiction services in a structured recovery environment is provided to individuals who generally remain in treatment for 3 to 6 months.

- **Intermediate Residential, Pregnant and Parenting Women (3.5)** service is a service provided in a facility licensed by the Department of Public Health to offer intermediate treatment to women with children and pregnant women with substance use dependence. These services are provided in a 24 hour residential program that provides counseling and other rehabilitative services in a structured environment. Services include integration of substance use and prenatal services; child care and child development services; direct interventions or linkages to programs for infants and children with prenatal exposure to drugs and alcohol; and facilitating access to Birth to Three programs, Early Head Start, and WIC. Pregnant and parenting women must be granted priority access within 48 hours of their request for treatment or provided interim services that include, at a minimum, HIV and TB Education, the risk of needle sharing, if applicable, counseling on the effects of alcohol and drug use on the fetus, referral for prenatal care and referral to a treatment provider offering PHP or IOP services. Women and/or women and their children generally remain in treatment for 3-6 months.
- **Long Term Residential (3.3)** service is a service provided in a facility licensed by the Department of Public Health to offer intermediate or long-term treatment or care and rehabilitation. This service is intended for individuals having significant impairment and long term difficulties with their functioning in major life areas due to a substance use disorder. Services are provided in a structured recovery environment having 24/7 staff supervision, and may include vocational exploration and training as well as skills training intended to assist individuals with re-integration into the community. Individuals generally remain in treatment for 6 to 9 months.
- [Recovery Houses](#) - Eligible population: Individuals in recovery from substance use disorders who would benefit from some services and clean/sober living environment prior to reintegration back to the community. Contains links for individual treatment centers and discusses insurances accepted as applicable, including any pre-authorization requirement and in or out of network issues.
 - **Transitional/Halfway House (3.1)** service for people with substance use disorders are licensed by the Department of Public Health to offer intermediate, long-term treatment care and rehabilitation. These services are intended for individuals who have experienced significant problems with their behavior and functioning in major life areas due to a substance use disorder and are ready to reintegrate back into the community. Minimal services are provided in a structured recovery environment with the focus being primarily on obtaining employment.
 - **Recovery Houses** are intended for individuals in recovery from substance use or co-occurring disorders who would benefit from a clean and sober environment to support their recovery. These houses provide 24 hour temporary housing and supportive services for such persons who present without evidence of intoxication, withdrawal or psychiatric symptoms that would suggest inappropriateness for participation in such a setting. The length of stay for residents is generally less than 90 days. Recovery houses are not licensed and do not offer treatment services.
 - **Supported Recovery Housing Services (SRHS)** are credentialed and contracted under the DMHAS Behavioral Health Recovery Program (BHRP) providing supported recovery housing in a clean, safe, drug and alcohol-free transitional living environment, with case management services available at least eight (8) hours per day five (5) days per week.
- [Sober Houses](#) – Eligible population: Individuals in recovery from substance use disorder who would benefit from clean/sober living environment. All facilities are self-pay.

- Certified Sober Living Homes are alcohol and drug-free residences where unrelated adults who are recovering from a substance use disorder voluntarily choose to live together in a supportive environment during their recovery. No formal substance use disorder treatment services are provided at these sites.
- [Walk-in Services](#) - Eligible population: Individuals requiring a substance use assessment to determine level of service need. Contains links for individual treatment centers and insurances accepted, including any pre-authorization requirement and in or out of network issues.
 - Substance Use Disorder Assessment Centers. Categories include Outpatient and Methadone.

[DMHAS Service Finder](#)

- Find services by region or town. Includes links to crisis services or links to find by specific type of service.

Prevention

[DMHAS: Preventing Fatal Opioid Overdoses](#)

- Naloxone (Narcan) is a prescription medication used in the event of an opioid overdose. If given quickly, it can help reverse effects of overdose and save a person's life. To get naloxone, you can either go to your primary care provider or visit a pharmacy with a pharmacist certified to prescribe and dispense it.
 - [NORA](#) (Naloxone & Overdose Response App) – free app from CT Dept. of Public Health. Contains information to prevent, treat and report opioid overdose, including where to find naloxone.
 - [Map](#) – showing pharmacies certified to prescribe naloxone.
 - [Naloxone Initiative](#) – information on what naloxone is and how to acquire it as well as how to access naloxone training
 - [“Using Naloxone to Reverse an Opioid Overdose”](#) – Video
 - [How to use Naloxone \(Narcan\)](#) – Brochure
 - [SAMHSA Opioid Overdose Prevention Toolkit / \[Spanish Version\]\(#\)](#) – Manual de Instruccion de SAMHSA Para la Prevencion de Sobredosis de Opioides
 - [StopOverdose.org](#) – includes overdose signs and what to do, materials and toolkits
 - [Opioid Overdose Basics](#) from National Harm Reduction Coalition
 - [How to use naloxone nasal spray](#) - video

[Never Use Alone, Inc.](#)

- National Overdose Prevention Lifeline, 1-800-484-3731: National overdose prevention call center providing crisis intervention and response hotline services to people who use substances while alone

[Prevention Services \(ct.gov\)](#)

- DMHAS' prevention system is designed to promote the overall health and wellness of individuals and communities by preventing or delaying substance use. Prevention services are comprised of six key strategies including information dissemination, education, alternative activities,

strengthening communities, promoting positive values, and problem identification & referral to services.

Regional Behavioral Health Action Organizations (RBHAOs)

- Administer Local Prevention Council (LPC) grants to municipalities to stimulate the development and implementation of prevention activities.
- Build capacity of local communities to understand and address problem gambling.
- Raise awareness and provide advocacy to the general public related to mental health promotion, suicide prevention and response, and substance abuse prevention, treatment and recovery.
- Lead the Regional Suicide Advisory Boards that support the overall vision of the statewide [CT Suicide Advisory Board](#), and provide the local and regional infrastructure for suicide prevention and response activities.
- Leverage funds to support prevention, treatment and recovery activities across each region.
- **Provide naloxone** (Narcan) training and kit distribution to communities.
 - For naloxone training and kit information, contact your RBHAO directly as noted [here](#).

Veterans

DMHAS Veterans Services

- Military Support Program (MSP): 866-251-2913 – Eligible population: individuals requiring behavioral health care who were in National Guard and Reserve and deployment in Afghanistan and Iraq. Expanded to include veterans on active-duty service and their families.
- DMHAS Veterans Recovery Center (VRC): 860-616-3832 – is co-located with Dept. of Veterans Affairs in Rocky Hill, CT and offers individualized outpatient recovery services. Eligible population: Veterans, National Guard and Reserve members with substance use disorders residing at the Dept. of Veterans Affairs Rocky Hill Campus Residential Services division and Veterans, National Guard and Reserve members residing in their own residences off campus. Admissions are voluntary.
 - [Application for Recovery Support Program](#)

Starlight Program for Military Personnel: 800-832-1022

- Eligible population: active-duty military members and veterans with substance use disorder, PTSD and mental health issues. 28-day co-occurring residential rehabilitation program for substance abuse, post-traumatic stress disorder (PTSD) and mental health issues.

Other Resources Available to People Experiencing Homelessness who may be experiencing issues with Substance Use and/or Mental Health

Additional eligibility requirements not known at time of publication.

ACCESS Mental Health for Moms

- Free consultative service for all CT providers working with pregnant and postpartum women. Provides psychiatric consultation with a perinatal psychiatrist via phone. May involve diagnostic support, guidance regarding medication treatment, psychotherapy and community support

needs, treatment planning and medication concerns related to preconception, pregnancy and lactation. Works to assist in addressing patient's mental health and/or substance use concerns. Consultative support only and does not provide psychiatric treatment.

- Resource and referral support

[CCAR Recovery Community Centers](#): Regional Centers providing support to people in recovery and their families

[DMHAS Community Forensic Services \(CFS\)](#)

- Jail Diversion/Court Liaison Program – Eligible population: Adults with psychiatric and co-occurring substance abuse disorders who are arrested on minor offenses. Provides access to appropriate treatment services via assessment, referral and linkage to community mental health services.
 - Contact: Danielle.Ebrahimi@ct.gov, 860-262-5728
- Jail Diversion Substance Abuse Program (JDSA) - Eligible population: Adults in Hartford courts with substance dependence who would otherwise be jailed. Provides immediate admission to residential detox and/or intensive residential treatment on day of arraignment or rapid admission to IOP. Services include referral to aftercare, intensive case management, sober house rent subsidy, other transitional housing options, client supports, compliance monitoring and reporting to court compliance.
 - Contact: Danielle.Ebrahimi@ct.gov, 860-262-5728
- Women's Jail Diversion (JDW) – Eligible population: women at risk of incarceration referred by New Britain, Bristol and New Haven courts or Probation and Parole. Provides comprehensive treatment and support services promoting recovery among women with histories of trauma. Services include treatment for trauma, mental illness and substance use disorder as well as community support services and limited transitional housing.
 - Contact: Danielle.Ebrahimi@ct.gov, 860-262-5728
- Alternative Drug Intervention (ADI) – Eligible population: individuals involved in the New Haven courts having substance use involvement. Provides intensive outpatient substance use treatment, intensive case management, basic needs, employment, education and linkages to 12-step programs.
 - Contact: Danielle.Ebrahimi@ct.gov, 860-262-5728
- Office of Pretrial Interventions – Eligible participants are referred by the court. Programs are available to clients from all courts in CT as well as CT residents who have to meet requirements for out-of-state arrests/convictions. Costs are responsibility of participant unless they have been determined “indigent” by the referring court, in which case, DMHAS funds the treatment.
 - Pretrial Alcohol Education Program – Eligible participants: individuals arrested for first time for operating a motor vehicle, boat, all-terrain vehicle or snowmobile under influence of alcohol and/or drugs, or individuals previously arrested for these offences who used a similar program to avoid a conviction provided that the original offence was over ten years ago without any intervening arrests/convictions. Provides clinical evaluation by a substance use professional, resulting in a report with recommendations to the referring court.
 - Pretrial Drug Education Program – Eligible participants: individuals arrested for possession of drugs or drug paraphernalia. Program may be used twice and, with court's

permission, a third time. Provides clinical evaluation by a substance abuse professional, resulting in a report with recommendations to the referring court.

- Contact: [Marti Kardol](mailto:Marti.Kardol), 860-262-5812
- Community Recovery Engagement Support and Treatment Center (CREST) – Eligible population: Individuals in New Haven who would not otherwise be diverted from/released from incarceration if not accepted into the program. Intensive day reporting program provides daily monitoring and structured skill building and recovery support services in collaboration with clinical services at DMHAS-operated Connecticut Mental Health Center.
 - Contact: Colette.Orszulak@ct.gov, 860-262-5841
- Advanced Supervision and Intervention Support Team (ASIST) – Eligible population: Individuals with mental health and/or substance use issues requiring judicial supervision referred by the courts or community supervision. Developed to meet the needs of clients requiring judicial supervision and mental health and substance use recovery services provided by DMHAS and Court Support Services Division (CSSD). Clinicians provide case management which coordinates services delivered by Alternative to Incarceration Centers (AIC)/service provider partnership, and closely monitors impact of services on client functioning and quality of life. Includes component of skills training and cognitive behavioral intervention.
 - [Marti Kardol](mailto:Marti.Kardol), 860-262-5812
- Sierra Pretrial Center – Eligible population: adults with serious mental illness who are in jail awaiting court disposition of charges who can be safely released to the community in a structured residential program. Collaboration with the Judicial Branch Court Support Services Division with clinical services provided by the DMHAS-operated Connecticut Mental Health Center. Services include comprehensive case management, psychiatric monitoring, medication monitoring, motivational enhancement, cognitive restructuring and training, consistent supervision and support services.
 - Contact: Danielle.Ebrahimi@ct.gov, 860-262-5728

[Toivo Center](#)

- Peer-run, non-profit initiative through Advocacy Unlimited, Inc. that includes statewide classes, workshops and center for holistic healing and stress management. Donation based offerings include yoga, meditation, qi gong, sound healing, laughter yoga, drumming, creative expression, support groups and more.

[Yoga in Our City](#)

- Non-profit organization providing high quality yoga instruction and wellness education
- Provides professional, accessible and inclusive programming to all
- Uses trauma informed approach