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Knowledge Informing Transformation

Assertive Community Treatment

An Evidence-based Practice





Resources



Let's start with a Video provided by SAMHSA.

This presentation is provided on the SAMHSA Website @

http://store.samhsa.gov/product/Assertive-Community-Treatment-ACT-Evidence-Based-Practices-EBP-KIT/SMA08-4345

Disclaimer



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Assertive Community Treatment has different names



- ACT
- PACT
- Assertive Outreach
- Mobile Treatment Teams
- Continuous Treatment Teams

ACT practice principles



- ACT is a service delivery model, not a case management program
- ACT's primary goal is recovery through community treatment and habilitation

ACT practice principles



ACT is characterized by:

- A team approach
- In vivo services
- A small caseload
- Time-unlimited services

- A shared caseload
- Flexible service delivery
- Fixed point of responsibility
- Crisis management available 24 hours a day, 7 days a week

ACT practice principles



- ACT is for consumers with the most challenging and persistent problems
- Programs that adhere most closely to the ACT model are more likely to get the best outcomes

Primary responsibility for all services



- ACT team members are experienced in psychiatry, psychology, nursing, social work, rehabilitation, substance-abuse treatment, and employment
- Rather than referring consumers to multiple programs and services, the ACT team provides the treatment and services consumers need

Help is provided where it is needed



Rather than working with consumers in an office or hospital, ACT team members work with consumers in their homes, neighborhoods, and other places where their problems and stresses arise and where they need support and skills

Help is provided where it is needed



- Rather than seeing consumers only a few times a month, ACT team members with different types of expertise contact consumers as often as necessary
- Help and support are available 24 hours a day, 7 days a week, 365 days a year, if needed

Shared caseload



- ACT team members do not have individual caseloads. Instead, the team shares responsibility for consumers in the program
- Each consumer gets to know multiple members of the team. If a team member goes on vacation, gets sick, or leaves the program, consumers know the other team members

No preset time limits on services



- ACT has no preset limit on how long consumers receive services. Over time, team members may have less contact with consumers, but still remain available for support if it's needed
- Consumers are never discharged from ACT programs because they are "noncompliant"

Close attention to consumers' needs



- ACT team members work closely with consumers to develop plans to help them reach their goals
- Every day, ACT teams review each consumer's progress in reaching those goals. If consumers' needs change or a plan isn't working, the team responds immediately

Close attention to consumers' needs



Careful attention is possible because the team works with only a small number of consumers — about 10 consumers for each team member

ACT provides assistance with...



- Activities of daily living
- Housing
- Family life
- Employment
- Benefits
- Managing finances

- Health care
- Medications
- Co-Occurring disorders integrated treatment (substance use)
- Counseling

ACT targets consumers with:



- Severe and persistent mental illness
- Significant difficulty doing the everyday things needed to live independently in the community, or
- Continuously high-service need

ACT team staffing



Team approach:

 90% or more of consumers have contact with more than 1 team member per week

Practicing team leader:

 A full-time program supervisor (also called the team leader) provides direct services at least 50% of the time

ACT team staffing



A program serving 100 consumers has at least:

- 1 or more full-time psychiatrists
- 2 full-time nurses
- 2 full-time substance-abuse specialists
- 2 full-time employment specialists

Peer specialists:

 Consumers hold team positions (sometimes called peer specialists) or other positions for which they are qualified with full professional status

Organizational boundaries



- Explicit admission criteria
- No more than 6 new admissions per month
- 24-hour coverage
- Responsibility for coordinating hospital admissions and discharge
- Full responsibility for treatment services
- Time-unlimited services



Questions and Discussion



Thank you.

Center for the Application of Substance Abuse Technologies

http://casat.org