



# Department of Mental Health (DMH)

Emily Hawes, Commissioner

Alison Krompf, Deputy Commissioner

Samantha Sweet, Director of Mental Health Services

Jeremy Therrien, Director of Mobile Crisis Program

# The Department of Mental Health: Mission & Vision

The **Mission** of the Department of Mental Health is to promote and improve the health of Vermonters. The Department resides under the Agency of Human Services and has the same critical mission: to improve the conditions and well-being of Vermonters and protect those who cannot protect themselves.

Our **Vision**: Mental health will be a cornerstone of health in Vermont. People will live in caring communities with compassion for and a determination to respond effectively and respectfully to the mental health needs of all citizens. Vermonters will have access to effective prevention, early intervention, and mental health treatment and supports as needed to live, work, learn, and participate fully in their communities.



# What we do at the Department of Mental Health

## We are:

- Responsible through statute for the mental health system of care for Vermonters.
- Composed of 302 staff positions (including 235 Facility staff and 67 Central Office staff).
- Handling a budget of \$318M that supports mental health services to over 25,000 Vermonters.
- Overseeing our 10 Designated Agencies and 2 Specialized Service Agencies.
- Running the Vermont Psychiatric Care Hospital (25 beds) and River Valley Therapeutic Residence (16 beds).
- Managing several contracts and grants to peer organizations, forensic psychiatrists, Vermont Child Psychiatry Access Program and statewide mobile crisis.
- Partnering with hospitals, community providers, police departments, courts, and more!



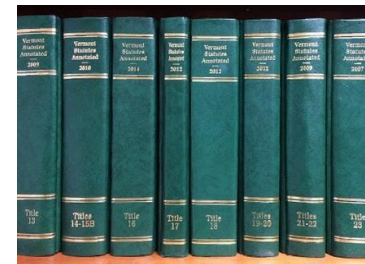
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The Department of Mental Health . . . shall centralize and more efficiently establish the general policy and execute the programs and services of the State concerning mental health, and integrate and coordinate those programs and services with the programs and services of other departments of the State, its political subdivisions, and private agencies, so as to provide a flexible comprehensive service to all citizens of the State in mental health and related problems.

The Department shall ensure equal access to appropriate mental health care in a manner equivalent to other aspects of health care as part of an integrated, holistic system of care.



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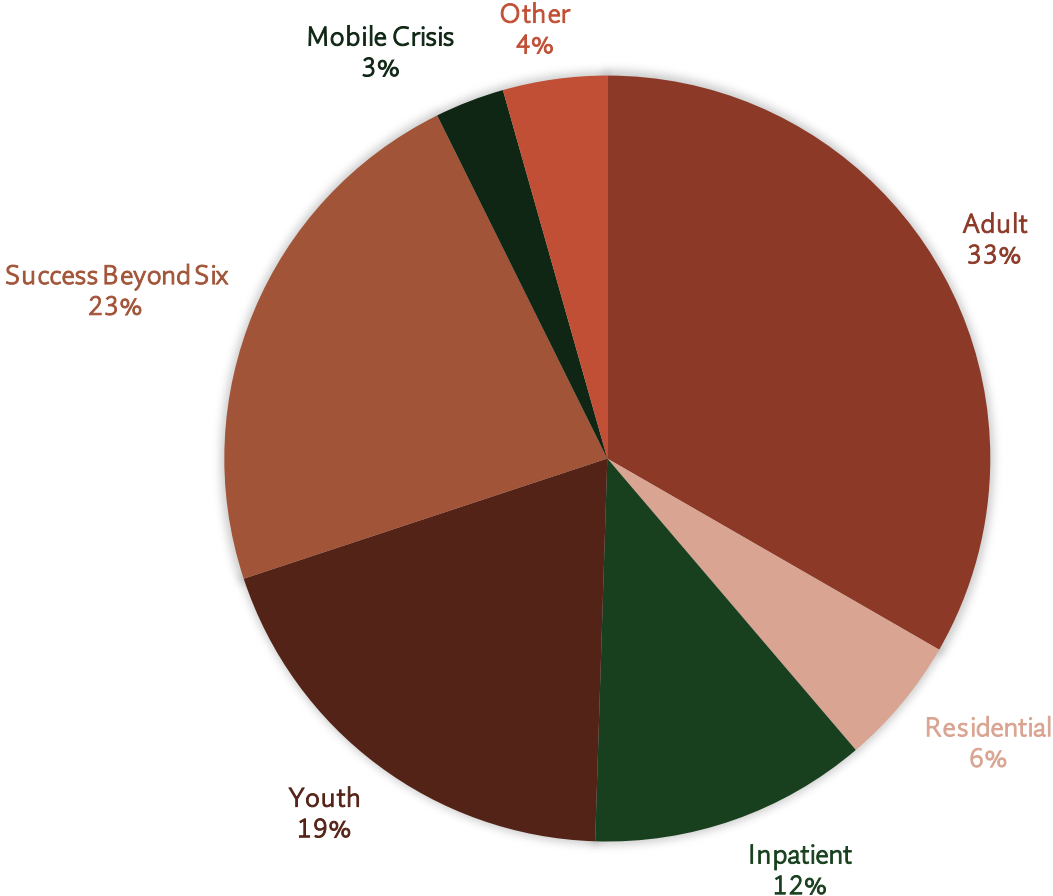
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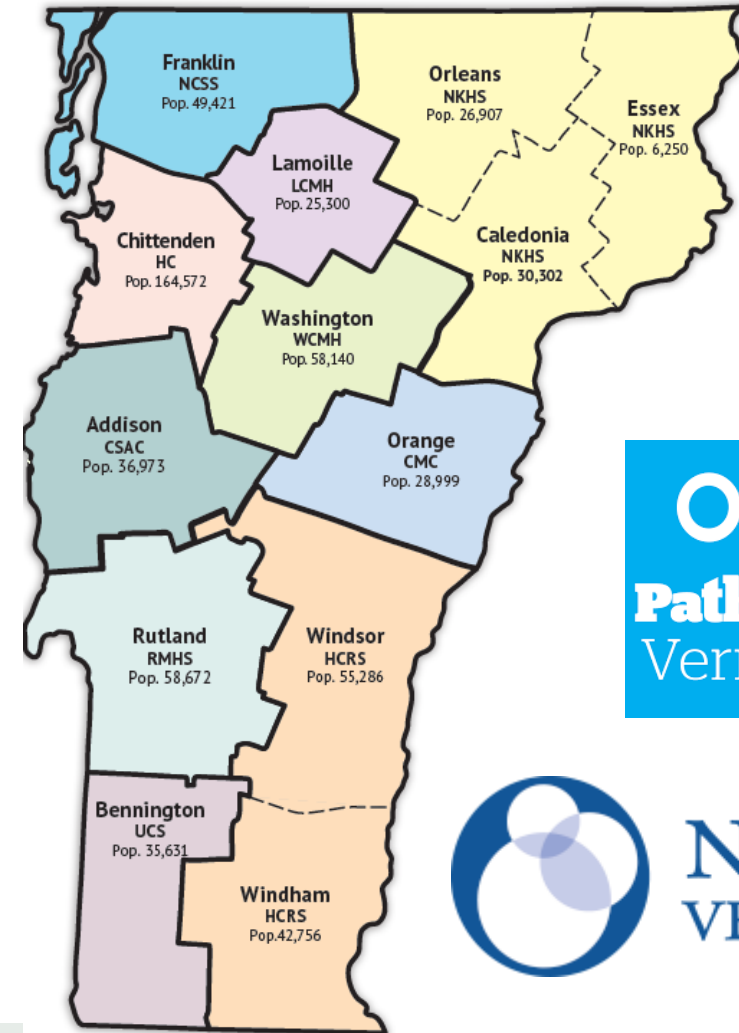




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# MENTAL HEALTH SYSTEM OF CARE

**Key to Provider Symbols**


- BLUE: ADULTS SYSTEM OF CARE
- GREEN: CHILD, YOUTH & FAMILY SYSTEM OF CARE
- ORANGE: SERVICES IN BOTH YOUTH & ADULTS

-  Peer-run Services & Residential Care
-  Department of Mental Health
-  Designated and Specialized Services Agencies
-  Private Providers




**Inpatient Hospitalization**  
229 total beds

<p>Children &amp; Adolescent 1 Facility   30 Beds</p> 	<p>General Inpatient (Adult) 7 Facilities   142 Beds</p> 	<p>Level One Inpatient (Adult) 3 Facilities   57 Beds</p> 
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**Secure Residential**  
16 total beds

<p>River Valley 1 Facility   16 Beds</p> 
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**Intensive Residential & Treatment Programs**  
92 total beds

<p>Youth Residential (PNMI) 5 Residences   45 Beds</p> 	<p>Intensive Recovery Residential 5 Residences   42 Beds</p> 	<p>Peer-run Residential 1 Residence   5 Beds</p> 
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**Crisis Supports & Response**  
56 total beds

<p>Children's Crisis Stabilization Program 1 Facility   6 Beds</p> 	<p>Youth Hospital Diversion Program 2 Facilities   12 Beds</p> 	<p>Mental Health Urgent Care for youth</p> 	<p>Mental Health Urgent Care for Adults</p> 	<p>Adult Crisis Beds 12 Facilities   38 Beds</p> 	<p>Crisis Assessment, Support &amp; Referral Continuing Education &amp; Advocacy</p> 	<p>988 Crisis Lifeline Centers &amp; Mobile Crisis Response</p> 
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**Community Mental Health**  
174 total beds/109 vouchers

<p>Micro-residential (HCBS) 3 Homes   9 Beds</p> 	<p>Youth Group Homes (PNMI) 4 Homes   13 Beds</p> 	<p>Group Residential Homes 19 Homes   152 Beds</p> 	<p>Shelter &amp; Care Vouchers DMH Housing Vouchers</p> 	<ul style="list-style-type: none"> <li>• Individual, family, and group therapy</li> <li>• Clinical assessment</li> <li>• Medical consultation and medication</li> <li>• Service planning and coordination</li> <li>• Community supports &amp; employment services</li> <li>• Schools/PCP/Early care &amp; learning ctrs (youth only)</li> <li>• Peer programming (adults only)</li> <li>• Prevention work (youth only)</li> </ul> 
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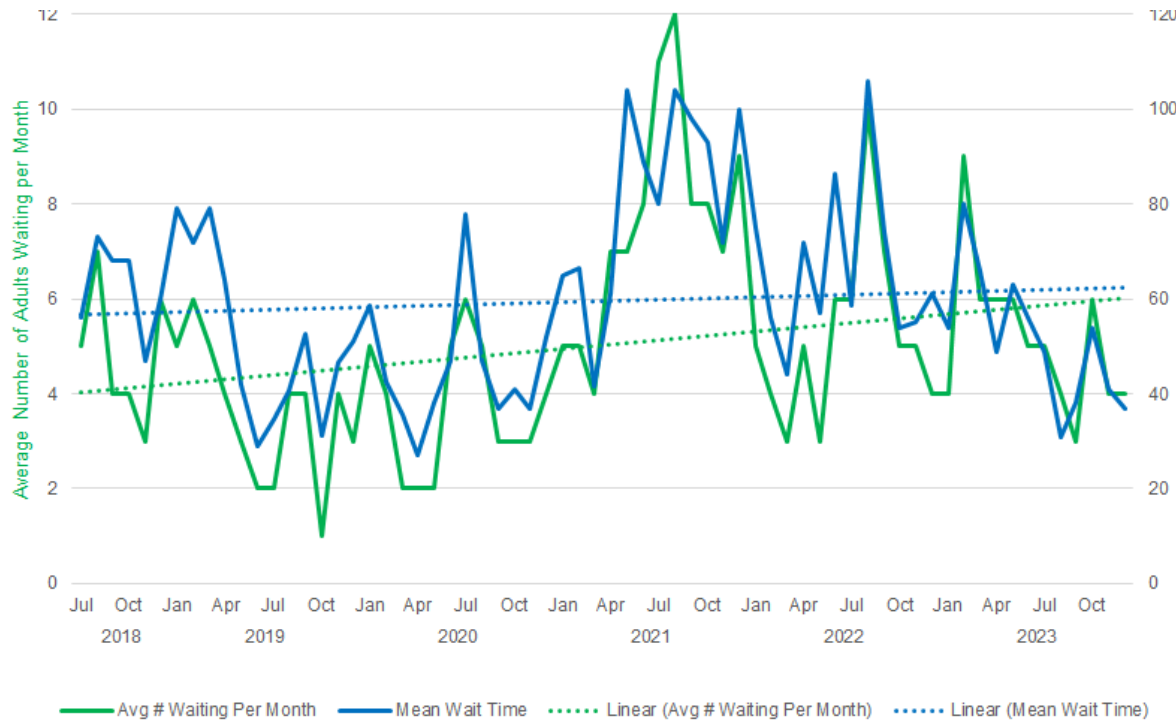
## Current Overall Capacity in the Mental Health System\*

Type of Bed	Total Beds	Occupied	Closed	Open	Notes
Adult Inpatient	181	132	36	13	This total includes all adult inpatient at UVMHC, BR, VPCH, CVMC, RPMC, VA, Windham Center
Youth Inpatient	33	26	7	0	All inpatient beds for youth are at the Brattleboro Retreat
Adult Crisis Beds	38	13	16	9	
Youth Crisis Beds	18	9	4	5	

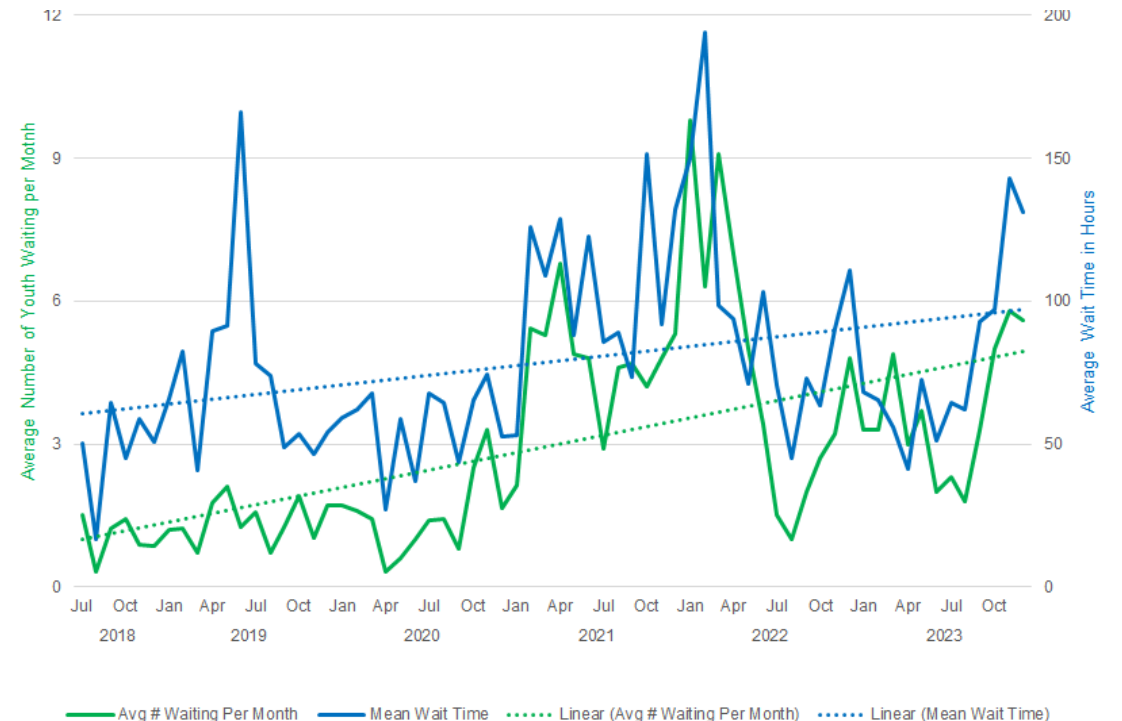
\*Point in Time data, from Jan 2024

# Current Overall Capacity in the Mental Health System\*

## Adults



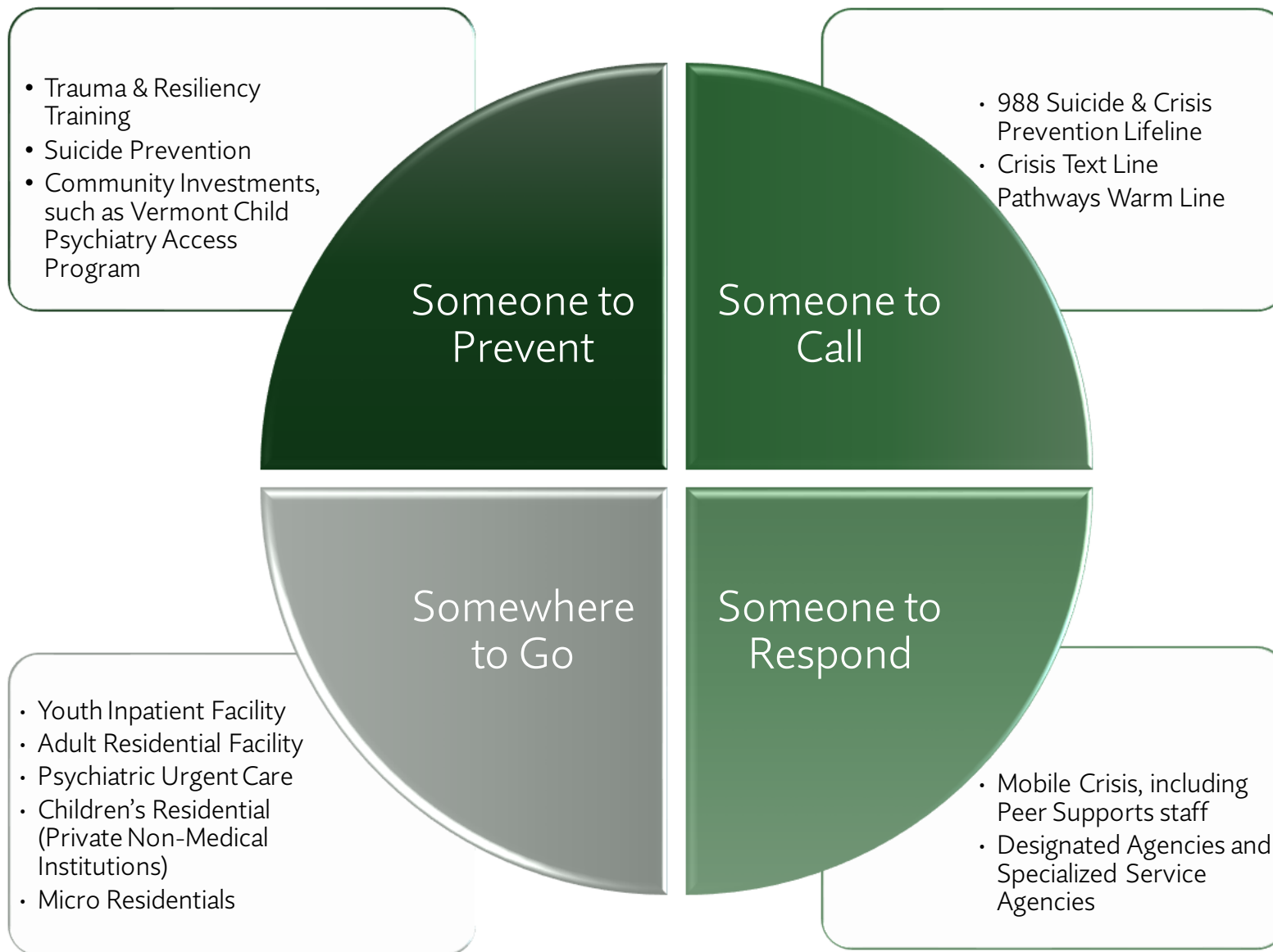
## Youth



\*Point in Time data, from Jan 2024







# Department of Mental Health's Legislative Testimony in CY 2024

- Mental Health Urgent Cares
- Statewide Mobile Crisis Response
- 988 Suicide Prevention and Crisis Lifeline
- Workforce recruitment and retention, including Peer Supports Credentialing
- Certified Community Behavioral Health Clinic demonstration application
- Forensic facility and competency restoration
- Southwestern Vermont Medical Center's Youth Inpatient Facility





# Mental Health Urgent Care

DMH has active contracts with 6 entities  
around mental health urgent care initiatives

Partner	Program	Contract Executed
<b>UCS Bennington</b>	Psychiatric Urgent Care for Kids PUCK Expansion	8/1/23
<b>HCRS Windham/Windsor</b>	Psychiatric Urgent Care for Kids (PUCK)	8/1/23
<b>LCMHS Lamoille</b>	EPIC (Emergency Psychiatric Intervention for Children)	7/1/23
<b>CSAC Addison</b>	Living Room (Adult)	10/1/23
<b>WCMHS Washington</b>	Living Room (Adult)	7/1/23
<b>BPD Burlington</b>	CAHOOTS	6/1/23

\*There are two additional contracts currently in process, both of which will provide additional mental health urgent care services (NKHS and Howard Center).

The Department expects both programs to begin offering services in 2024.

# Mobile Crisis

DMH executed the Statewide Mobile Crisis contract with Health Care & Rehabilitation Services (HCRS) effective January 1, 2024.

How is this different from the current crisis and emergency services system?

- client identified crisis
- client identifies where to meet
- includes substance use crisis
- 2-person response including staff with lived experience in the response
- follow-up services to check on safety planning and make sure the crisis is resolved
- rapid response and resolution with a goal of an average of a 60-minute response time



**Impact:** supporting more people, quick response with trained staff, 2-person allows to be able to support family and other involved in the crisis.

As of January 1, a minimum of 57 mobile crisis responses have been completed in the State.



# 988: The Vision

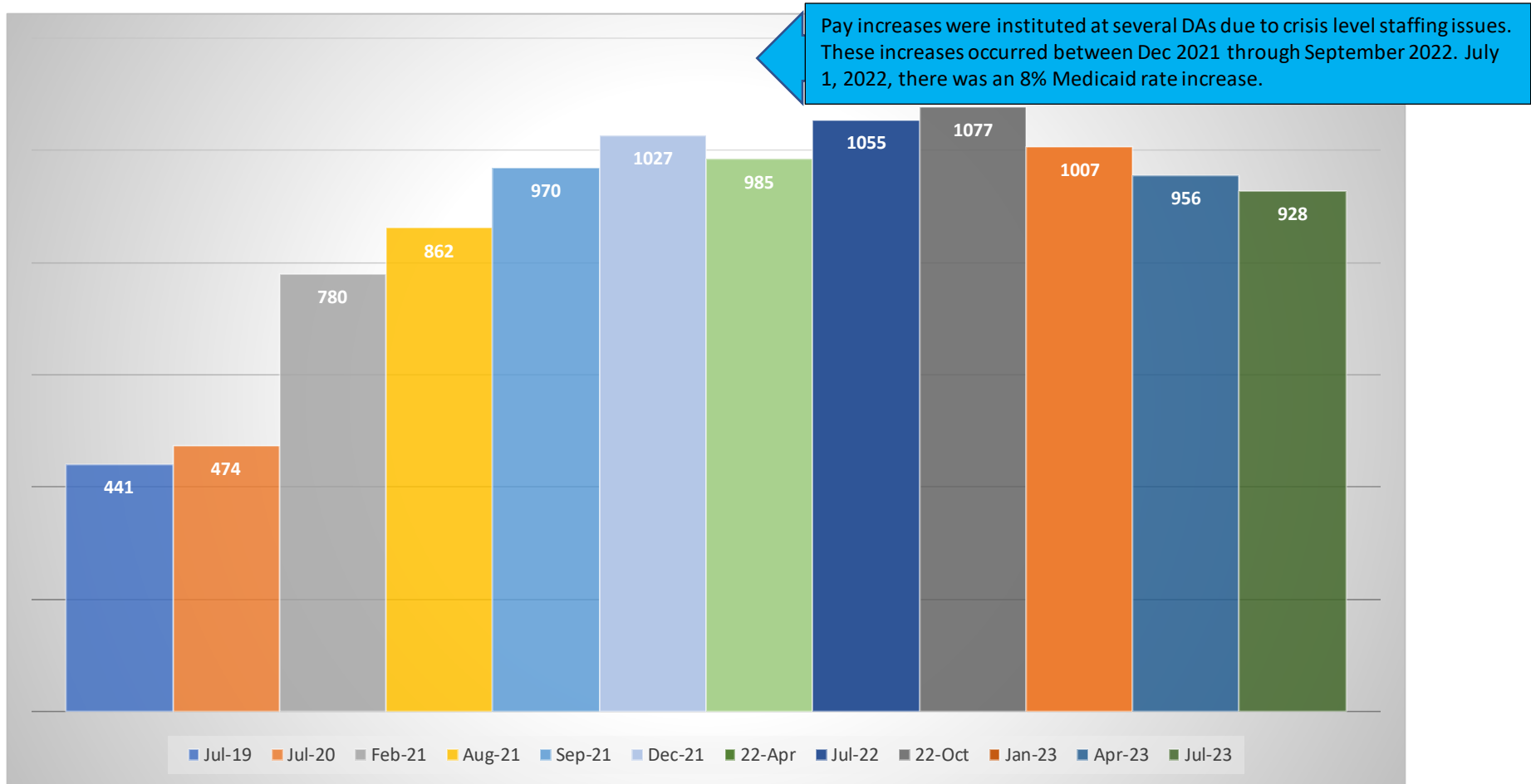


- 988 offers 24/7 access to trained crisis counselors who can help people experiencing mental health-related distress, thoughts of suicide, mental health or substance use crisis, or any other kind of emotion distress.
- People can call or text 988 or chat at [988lifeline.org](https://988lifeline.org) for themselves or if they are worried about a loved one.
- The long-term vision for 988 is to build a robust crisis care response system across the country that links callers to community-based providers who can deliver a full range of crisis care services.

# 988

- There are around 800 calls a month. For December, there were 966 Vermont calls with an 86% in state answering rate and 15 seconds to answer.
- Vermont's goal is to answer more than 90% of calls with an answering rate less than 20 seconds.
- NCSS and NKHS are answering agencies and have been 24/7 since August of 2023.
- With 988, Vermonter's have access to a crisis counselor 24/7. The caller will always be connected to a live person.

# DA & SSA: Vacancy Numbers



# DA & SSA: Recruitment & Retention

## Employee Investment Program

- A General Fund appropriation of \$3M used as matching funds for a total gross GC Investment amount of \$6.9M.
- Approximately **500** staff received a total of \$1.5 million in forgivable loans.
  - 96% of employees who received tuition assistance or loan repayment fulfilled their commitment; this is a 26% increase over prior retention rates.

# Supporting Peer Workforce Development

The Peer Workforce Development Initiative grant was developed by DMH to help the state build and maintain an infrastructure for a statewide mental health peer workforce. First awarded to Pathways Vermont in early 2020, it represents a continuation of work funded by Act 79 to expand and support peer services through a focus on peer workforce development.

Following the six stakeholder meetings, a report was released in February 2023 that included consensus recommendations for developing and implementing a mental health peer support certification program.

The implementation work will continue in partnership with PWDI in phase 3 and includes:

- Development of a process for certifying/ grandfathering current peer support workers
- Development of a statewide credentialing test for peer support workers
- Determining continuing education requirements
- Determining reciprocity process for peer support providers who hold certifications from other states
- Advising on the drafting of a Request for Proposals (RFP) for an entity to oversee screening and training.





# CCBHC's 9 Required Services



# CCBHC Model

Be an integrated and sustainably-financed model for care delivery

- **Ensure access** to integrated, evidence-based substance use disorder and mental health services, including 24/7 crisis response and medication-assisted treatment (MAT).
- **Meet stringent criteria** regarding timeline of access, quality reporting, staffing and coordination with social services, criminal justice and education systems.
- **Receive flexible funding** to support the real costs of expanding services to fully meet the need for care in their communities.

CCBHCs have dramatically increased access to mental health and substance use disorder treatment, expanded states' capacity to address the overdose crisis and established innovative partnerships with law enforcement, schools and hospitals to improve care, reduce recidivism and prevent hospital readmissions.

# CCBHC: Planning Grants

- Five Designated Agencies received federal planning grants for \$1 million per year for four years to prepare to become a Certified Community Behavioral Health Clinic (CCBHC). They are:
  - Clara Martin Center
  - Health Care & Rehabilitation Services of Vermont
  - Howard Center
  - Northeast Kingdom Human Services
  - Rutland Mental Health Services
- Vermont received a federal planning for \$1 (Mar 2023-Mar 2024) to cover state costs related to implementation.

# CCBHC: Public Input & Stakeholder Engagement

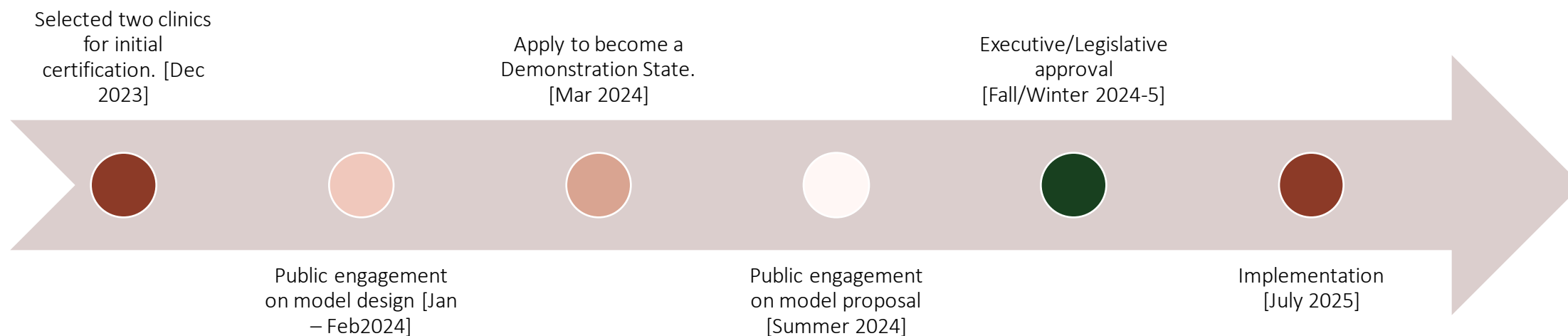
- To gather community input, DMH is offering a variety of options.
  - **Community meetings:** to provide an opportunity to learn about the model, share initial thoughts and perspectives, and discuss its potential benefits. The meetings will also serve as a space to openly share experiences with the current system of care. One virtual meeting (Jan 24) and two in-person meetings (Waterbury on Jan 10 and Rutland on Jan 17) are scheduled.
  - An **online survey:** an alternative to the more discussion-focused approach allowing a broader participation for Vermonters to contribute valuable input.
  - A **steering committee:** to develop the Vermont model began in December.



# CCBHC: Steering Committee Membership

Stakeholder Group	Number	Percentage
Lived Experience (personal or family)	11	49%
Designated Agencies	3	13%
Federally Qualified Health Centers	1	4%
Primary Care	1	4%
Substance Use	1	4%
Blueprint	1	4%
Refugee/new American	1	4%
Legislative	1	4%
Criminal justice	1	4%
Advocacy	1	4%
Workforce Training	1	4%
Housing/Homelessness	0	
Veterans/Military	0	
Older Vermonters	0	
Youth	0	
Employment	0	

# CCBHC: Tentative Timeline\*



\*Timeline is contingent on Vermont being selected for and accepting "Demonstration" status with federal partners. The selection process is highly competitive.

Thank you!