

Vermont Department of Mental Health

2015 Department Overview
House Human Service Committee
1/8/15
Paul Dupre, Commissioner

Tentative Agenda

- Introductions (5 minutes)
 - DMH Staff
- Commissioner Comments (5 mins)
 - Paul Dupre
- DMH Organizational Overview (10 mins)
 - Susan Onderwyzer
- DMH Systems Overview (10 mins)
 - Jay Batra, Frank Reed
- Questions/Comments (15 mins)

Key Organizing Principles

VISION

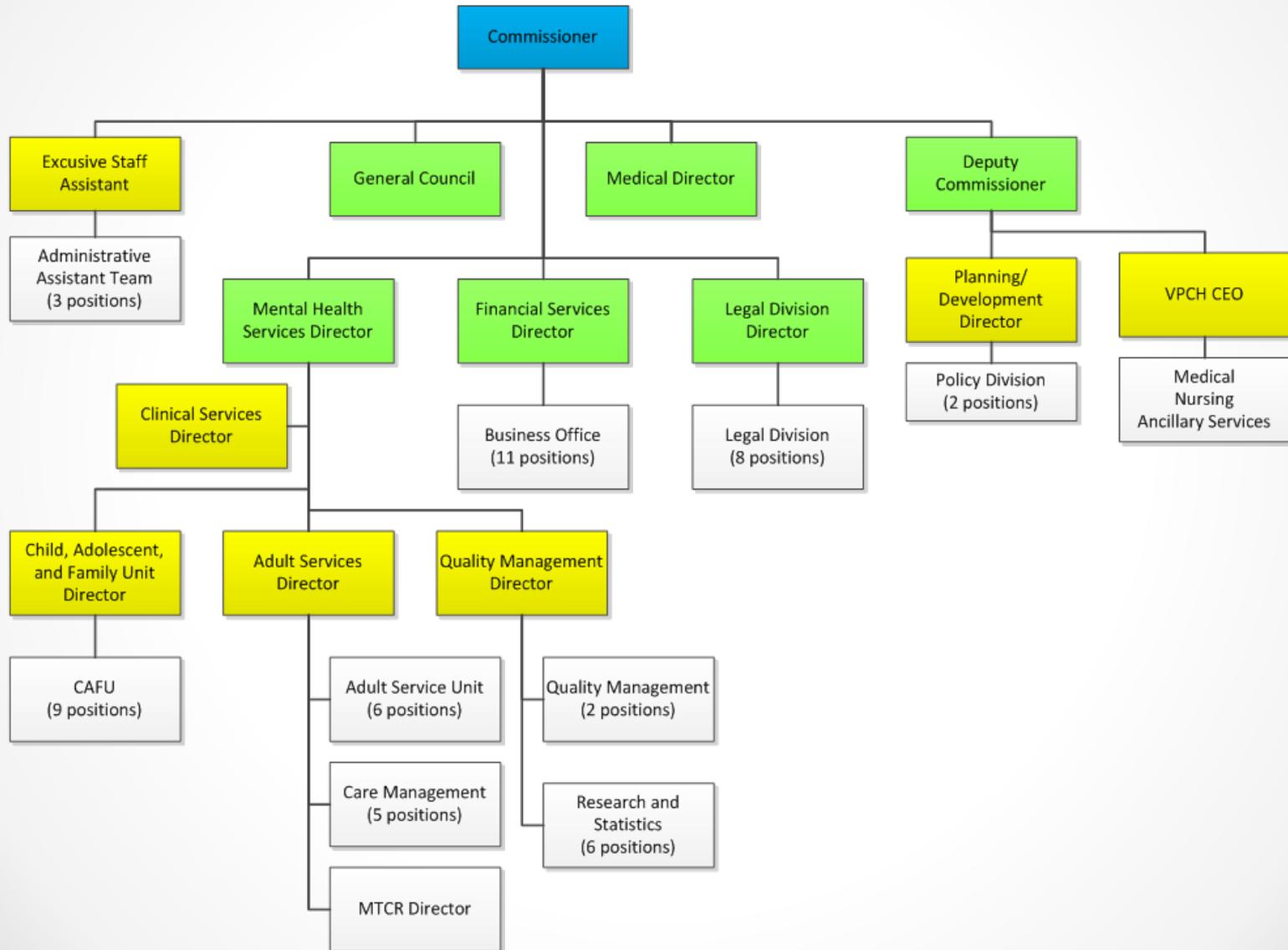
Mental health will be a cornerstone of health in Vermont. People will live in caring communities with compassion for and a determination to respond effectively and respectfully to, the mental-health needs of all citizens. Vermonters will have access to effective prevention, early intervention, and mental-health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

MISSION

It is the mission of the Vermont Department of Mental Health to promote and improve the mental health of Vermonters.

- A key organizing function for DMH is the **operations of the central office**
- The Designated Agency (DA) community-based mental health service delivery system holds the organizing functions for the state funded system of care in the communities.
- The final organizing function of the DMH is supporting access to acute inpatient psychiatric care for persons needing involuntary hospitalization at the VPCH and within the 5 designated hospitals system of inpatient care.

Organizational chart

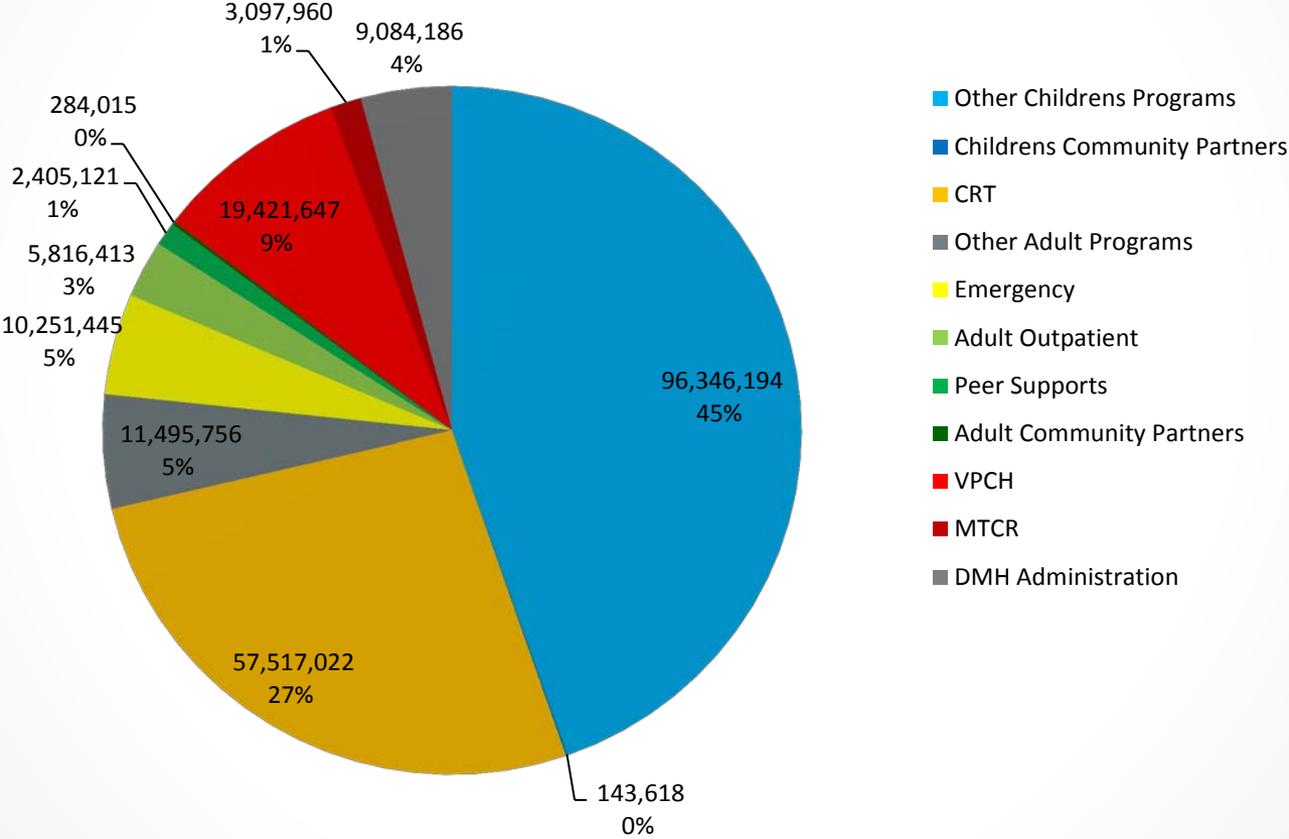


Central Office

- Operations
- Administrative Support Staff
- Financial Services Unit
- Legal Services Unit
- Research & Statistics Unit
- Clinical Care Management
- Policy, Planning & System Development
- Quality Division
- Children and Family Services Division
- Adult Mental Health Services

Revenue and Expenses

Department of Mental Health Revenues and Expenses



Designated Agencies

- Clara Martin Center (CMC)
- Counseling Services of Addison County (CSAC)
- Health Care and Rehabilitation Services of Southeastern Vermont (HCRS)
- HowardCenter (HC)
- Lamoille County Mental Health Services (LCMHS)
- Northwest Counseling and Support Services (NCSS)
- Northeast Kingdom Human Services (NKHS)
- Rutland Mental Health Services (RMHS)
- United Counseling Service (UCS)
- Washington County Mental Health Services (WCMHS)
- SSA's (NFI, Pathways Vermont)

Community Mental Health System of Care

Children & Families

Case Managers
Clinical Services
Intensive Family-
Based Services
Therapists
Alternative Schools
Behavior
Interventionists
Crisis Response

CRT Services

Case Managers
Clinical Services
Housing Supports
Group Homes
Intensive Residential
Recovery
Individualized
placement models
Groups Therapies
Employment
Programs
Peer Supports
Crisis Response

Adult Outpatient

Office Based
Medication
management
Individual Counseling
Groups
Outreach
Non-Categorical Case
Managers
Elder Care Clinicians
Crisis Response

Emergency Services

Outreach
Mobile Crisis Teams
Street Outreach
Interventionists
Crisis Care Centers
Hospital Diversion
Beds
Assessment &
Referral to Services

Peer Programming

Crisis Beds/Supports; Wellness Co-Ops & Centers; Peer Recovery Programming

Child, Adolescent, & Family Unit

CAFU works closely with its network of DAs and one SSA to provide services that include:

- Prevention, Early intervention and Community Consultation
- family supports
- clinical assessment and treatment
- Immediate response, Acute Care
- Intensive residential placement

Program

- The Child, Adolescent, and Family Unit (CAFU) oversees a system that provides evidenced-based mental health services and supports to families so that children can live, learn, and grow up healthy in their family, school, and community.

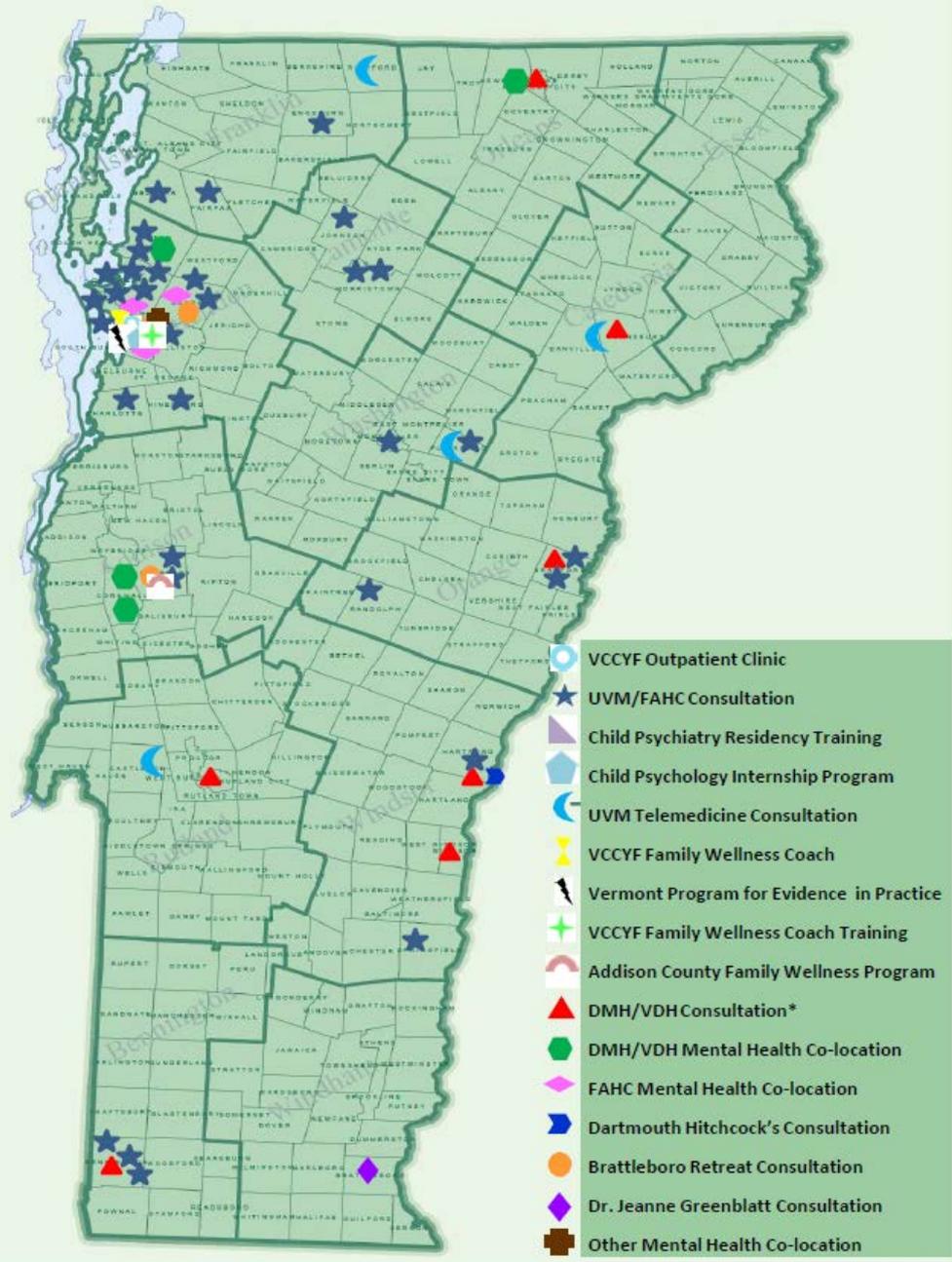
Population

- It is the mission of the Vermont Department of Mental Health to promote and improve the mental health of Vermonters. Pursuant to 18 V.S.A. § 7401 and § 8907, the Department of Mental Health, under the authority of the Commissioner of Mental Health and contracts with designated public or private non-profit agencies, assures planning and coordination of services “needed to assist children and adolescents with or at risk for a severe emotional disturbance.”

CAFU

Integrated Family Services (IFS)

- IFS is a framework of services across AHS that seeks to bring all AHS child, youth, and family services together in an integrated and consistent continuum of services
- CAFU is an integral part of the steering committee
- Early intervention and support reduces negative outcomes
 - Access to care will be timely and appropriate
 - Uniform standardized assessments and one family plan
 - Master grant and Global commitment waiver provide flexibility and keep focus on achieving outcomes
 - Current pilot sites at Addison County & Franklin/Grand Isle Counties



Adult Outpatient Program

DA's provide outpatient treatment services to adults who are experiencing:

- Depression, anxiety, and other mental health symptoms, such as thoughts/attempts of suicide
- Family problems
- Alcohol and drug abuse
- Histories of psychological trauma, lingering impairments, disabling depression
- Accessing community and medication supports
- Day-to-day common difficulties
- Capacity to serve individuals with severe functional impairments (SFI) eligible for release from the Department of Corrections

Services include:

- Emergency and crisis response
- Individual, group and family therapies & Non-categorical case management
- Increasing access to mental health and substance use screening, early intervention, referral, support and treatment within the Vermont Blueprint for Health primary care practices
- care coordination between DAs and other providers

Community Rehabilitation & Treatment

The Population

- It is the mission of the Vermont Department of Mental Health to promote and improve the mental health of Vermonters. The Department of Mental Health, under the authority of the Commissioner of Mental Health, contracts with designated public or private non-profit agencies, assures planning and coordination of services “to individuals with mental illness to become as financially and socially independent as possible.”

Program Services

- Comprehensive mental health services through Designated Agencies to clients with severe and persistent mental illness
- Psycho-social services include: case management, evidence-based interventions to support recovery, psychiatric care, employment support and life skills, medication management and other supportive care.

Peer Services

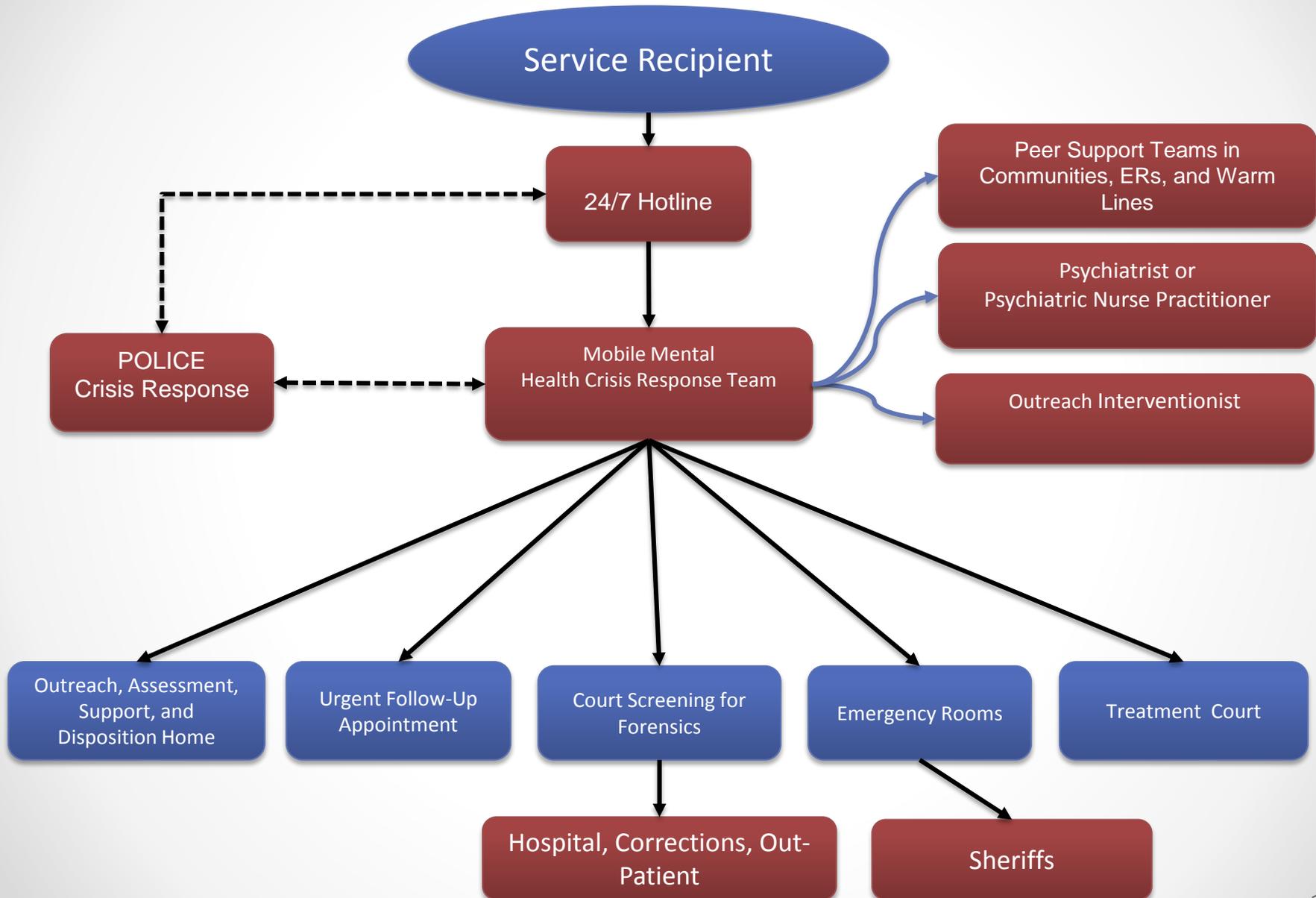
- Support services are provided by trained peers or peer-managed organizations focused on helping individuals with mental health and other co-occurring conditions to support recovery.
- Persons with “lived mental health experience” are support resources to individuals, as well as traditional service providers.
- Individuals with mental health conditions are receiving care in the most integrated and least restrictive settings available rather than higher levels of care
- Individuals can exercise choice in selecting the necessary components of their support and services network

Emergency Services

- Provides mental health emergency services twenty-four hours a day, seven days a week to individuals, organizations, and communities
- Services include telephone support, face-to-face assessment, referral, and consultation
- Provide assistance to people who are in need of crisis services for emergent issues in a timely manner
- Also serve communities, schools, or other organizations trying to cope with events such as suicide, natural disaster and other traumatic events
- Assess the immediate mental health situation and arrange for care as necessary

Mental Health Crisis Response

Crisis Care Management System Assistance



Intensive Residential

5 Intensive Residential Programs

- Continuation of stabilization following hospitalization
- Strengthening daily livings skills, social, vocational skills, with transitional planning back to home community through connections made between the IRR and the community team bridging during the transitional period
- Successful return of resident to home communities and surrounding area, through improved coping skills and personal recovery.
- On average, 86% of IRR do not return to hospital within 2 years of discharge

Secure Residential Program

- The DMH opened Middlesex Secure Residential in June 2013 with 7 beds
- MTCR is a therapeutic recovery residence for individuals requiring security and observation in a locked setting
- It is a transitional program, with every effort put forth to return individuals to their communities
- DMH will be closely monitoring on-going need for this program as it goes forward and will make recommendations accordingly

Designated Hospitals

The Commissioner of the Department of Mental Health is statutorily responsible for the supervision of patients receiving involuntary mental health treatment. There are five designated hospitals in the state that provide adult psychiatric care and one state-run hospital that provides adult involuntary psychiatric care.

- DMH contracts with Rutland Regional Medical Center for 6 Level I beds. Its total adult psychiatric inpatient bed capacity is 23
- DMH contracts with Brattleboro Retreat for 14 Level 1 beds. Its total adult psychiatric inpatient bed capacity is 89
- UVM-MC provides no Level I beds, and has a total adult psychiatric inpatient bed capacity of 27 *
- Windham Center provides no Level 1 beds in its total adult psychiatric inpatient bed capacity of 10
- Central Vermont Medical Center provides no Level 1 beds in its total adult psychiatric inpatient bed capacity of 14
- VPCH provides 25 adult Level 1 beds

Monthly Reporting

- Monthly Summary Reports
 - Inpatient wait times
 - Average persons waiting per day for inpatient placement
 - DMH Snapshot
 - http://mentalhealth.vermont.gov/reports_Data/SysSnapshot
 - Level 1 summary reporting
 - Inpatient capacity reporting
 - Community capacity reporting

DMH Contacts

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