

# Vermont CHILD Grant (Children's Health Integration, Linkage, and Detection)



Promoting Integration of Primary and Behavioral Health Care  
Substance Abuse and Mental Health Services Administration



**\$9.9 Million Dollars**  
**Five Year Grant**  
**9/30/2017-9/29/2022**  
**Currently in Year 2**

**Awardees:**

- Vermont
- New York
- Kentucky





*"As soon as your dentist gets here, we'll begin."*

# Integrated Mental Health and Primary Care

# Pediatric Bi-Directional Integrated Care

## SAMHSA's Integrated Care Definition:

- ▶ The care that results from a practice team of primary care and (mental) health clinicians working with patients and families, using a systematic and cost effective approach to provide patient centered care for a defined population

## Bi-directional care includes:

- ▶ Primary care in the DA and mental health services at the FQHC
- ▶ Practice and provider changes to promote collaboration with an emphasis on whole patient health



# SAMHSA's PIPBHC Grant Goals

1. Promote full integration and collaboration in clinical practice between primary and behavioral healthcare;
2. Support the improvement of integrated care models for primary care and behavioral health care to improve the overall wellness and physical health status of adults with a serious mental illness (SMI) or children with a serious emotional disturbance (SED); and
3. Promote and offer integrated care services related to screening, diagnosis, prevention, and treatment of mental and substance use disorders, and co-occurring physical health conditions and chronic diseases.

## Vermont's CHILD project integration

- ▶ Targets children and youth with, or at risk for, serious emotional disturbance and their families
- ▶ Occurs within Vermont's existing system of services and supports
- ▶ Includes innovations such as shared visions for community wellness, intensive care coordination, sharing of EHR info, shared learning opportunities, family health and wellness education, etc.

# Overview of VT Child Grant

- ▶ Goal 1: To provide safe, accessible and family-centered healthcare home for children, youth, and families to receive comprehensive, integrated and holistic pediatric and behavioral health care services
- ▶ Goal 2: To develop and implement a bidirectional, integrated model of child and family healthcare delivery that truly invites and engages the family...
- ▶ Goal 3: To enable the target population to improve their overall wellness and physical and mental health as a result of a bidirectional integrated care delivery model that supports screening, assessment, diagnosis, prevention, and treatment...
- ▶ Goal 4: To address social determinants of health...utilizing a health related quality of life screen to open a conversation with children/youth and their families about the social context in which they live/work/attend school

# Pilot Regions

## Region 1: Springfield

- ▶ FQHC: Springfield Medical Care Systems (SMCS)
- ▶ DA: Health Care and Rehabilitative Services (HCRS)

## Region 2: Franklin/Grand Isle

- ▶ FQHC: Northern Tier Center for Health starting at the Richford location (The NOTCH)
- ▶ DA: Northwestern Counseling and Support Services (NCSS)

2 additional pilot communities in Year 3 of grant (2019-2020)



# Grant Activities

Each region has tailored staffing and activities at their sites to meet their community's specific needs including:

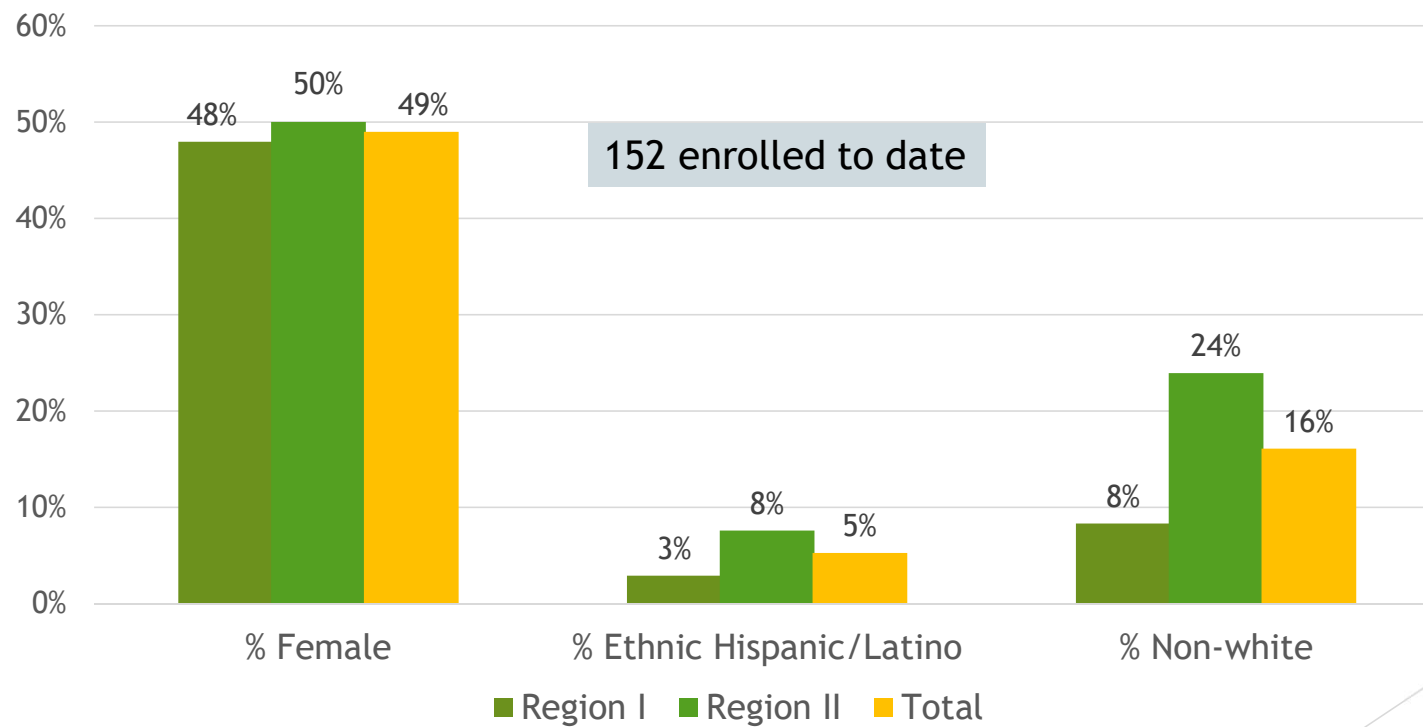
- ▶ Mental health clinicians providing services the DA and FQHC, school (Springfield), mobile in the community, and home
- ▶ Pediatric providers at the DAs (care conferences, provider to provider consult, team meetings, some clinic time)
- ▶ Dental provider at DA in Springfield (starting February 2019)
- ▶ Nurses
- ▶ Care coordinators
- ▶ Health and wellness coaches and parenting coach
- ▶ Family and individual health and wellness activities to increase coping skills, resiliency, and allow families to flourish while buffering the effects of trauma and toxic stress
- ▶ Community health and wellness activities as prevention, health promotion, and outreach

# Partners

- ▶ Evaluation: Vermont Child Health Improvement Program
- ▶ Training: Vermont Center for Practice Improvement & Innovation
- ▶ Health Equity: Cultural Research Solutions
- ▶ Family and Youth Voice: Vermont Federation of Families for Children's Mental Health
- ▶ Systems Integration and Improvement including EHR Needs: Behavioral Health Network of Vermont and Bi-State Primary Care Association
- ▶ Other VT AHS Departments such as DVHA, Health, etc.
- ▶ Other community provider organizations
- ▶ Technical Assistance: Afia Partners, Michigan: focusing on the unique needs of pediatric integration, enrollment, evaluation, teaming, etc.

# Who is Being Served?

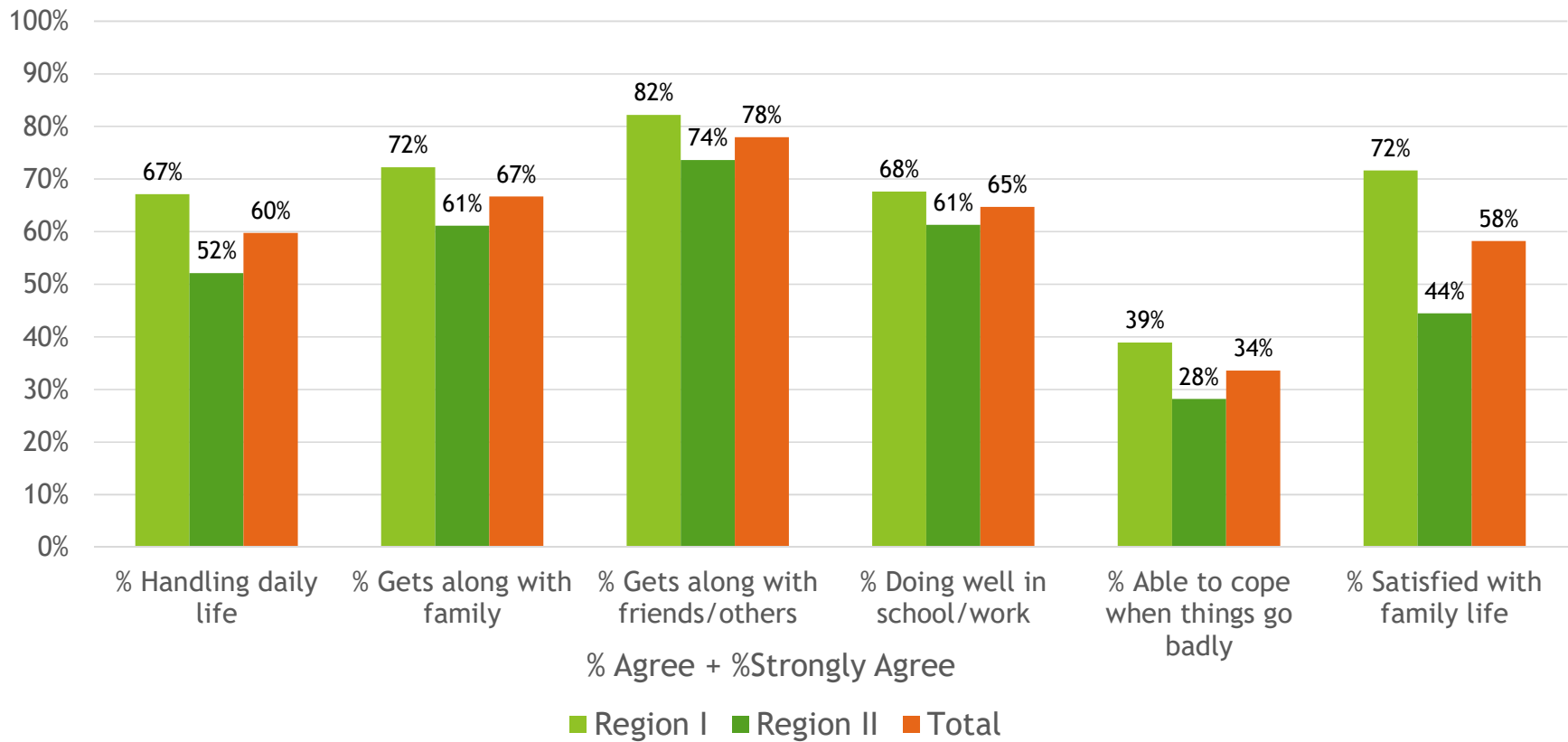
Demographics: Gender, Ethnicity & Race



Average age to-date is 10.5 yrs

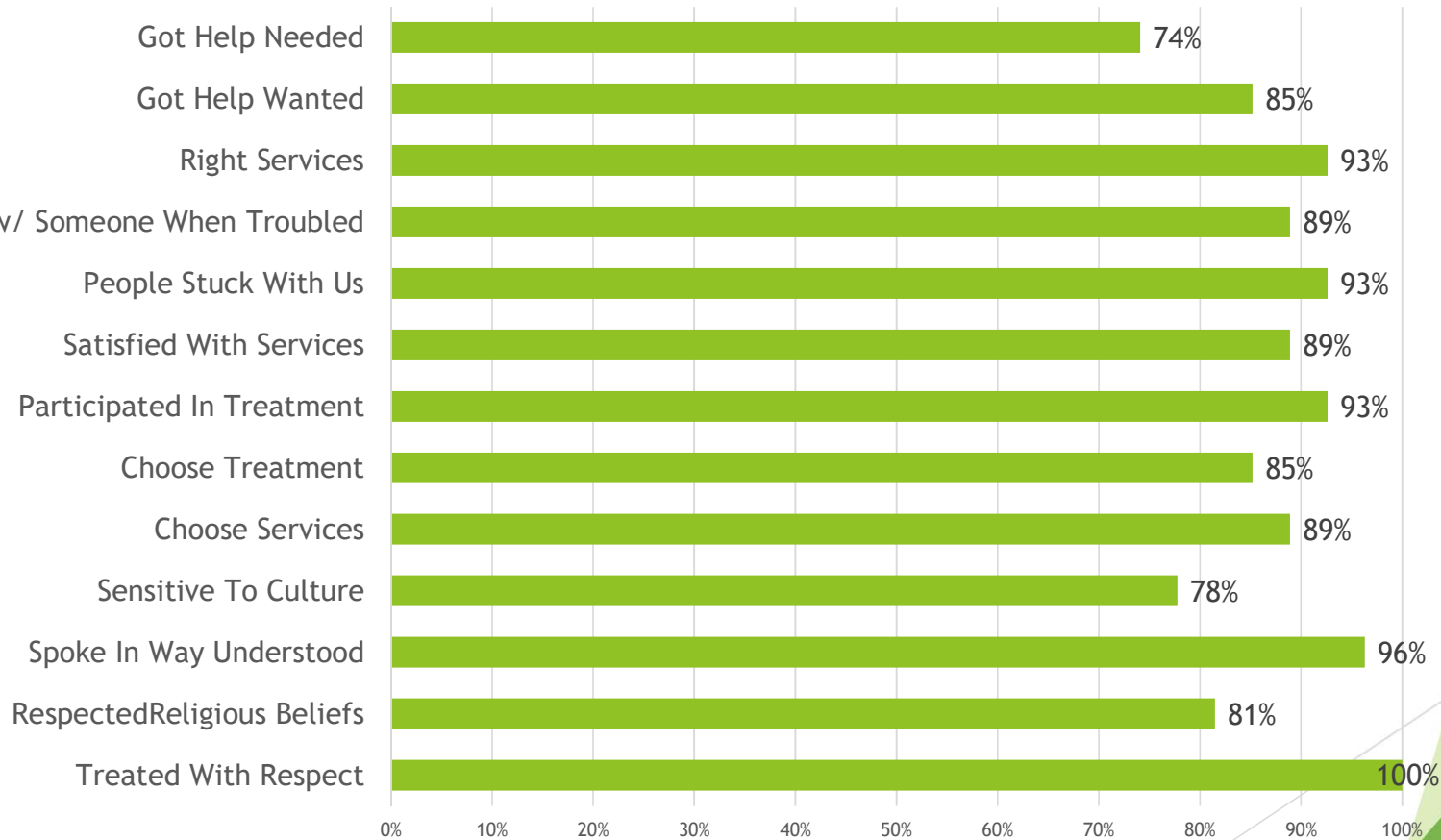
# Evaluation: Measurement of Functioning

## Start of Services: Measure of Functioning



# Early Data from 6 Month Reassessments

Regions I & II: Perception of Care at 6 Month Reassessment



# Progress and Sustainability

- ▶ Identify next two regions to implement pediatric integration
- ▶ Financing, sustainability, and integration with health reform efforts
  - ▶ Sustainability planning with DVHA and stakeholders
  - ▶ Kick off meeting 2/4/19 to explore opportunities in the context of our existing payment reform and delivery system reform efforts
- ▶ Training and technical assistance
  - ▶ Collaborative documentation
  - ▶ University of Michigan pediatric integration online course
  - ▶ Attachment, Regulation, and Competency (ARC) Framework statewide trainings
  - ▶ Health equity activities
  - ▶ Motivational interviewing
  - ▶ Health coaching model

# Questions?

