

**Department of Mental Health**

**FY 22 BAA Budget Submission  
Narrative Talking Points**

**VPCH/MTCR Staff Incentives**

FY 22 Incentives:

Gross: \$1,437,924                      General Fund Equivalent: \$632,687

FY 23 Incentives:

Gross: \$289,734                      General Fund Equivalent: \$127,483

DMH is proposing staff incentives for recruitment and retention purposes due to staffing shortages at the inpatient facilities. There is funding to cover both FY 22 and FY 23. The FY 23 amount will be one-time funding that will carry forward into F 23.

**16 Bed Residential Start Up Cost**

Gross: \$150,000                      General Fund Equivalent: \$150,000

This is a one-time cost to purchase furniture and equipment necessary to operate the new Secure Residential Recovery facility.

**Children's Crisis Supports (Jarrett House)**

Gross: \$225,570                      General Fund Equivalent: \$99,251

This is a children's crisis bed facility that is suffering from staffing shortages and are unable to keep beds on-line. This is an effort to provide additional funding to cover the additional cost of travel partners.

Jarrett House is operating at reduced capacity. Recruitment efforts continue, and two out of the seven vacant positions from August are filled. No improvement in job market despite targeted retention and recruitment efforts.

**Maintain 988 Suicide Prevention Line**

Gross: \$440,000                      General Fund Equivalent: \$440,000

DMH leveraged two federal grants to build in-state capacity for answering calls to the National Suicide Prevention Lifeline from Vermonters. Through that work we have successfully improved from an in-state answer rate of 0% for Vermont callers to the Lifeline in 2018 to a 76% answer rate as of August, 2021. The goal is to hit 90% by July 1, 2022. The federal funding went towards onboarding two Vermont Crisis Centers who became certified by the National Lifeline: Northwestern Counseling and Support Services and Northeast Kingdom Human Services. These agencies are now covering the phone line 24/7. In state call response provides Vermont callers with referral options to local resources such as mental health

counseling, economic or housing supports, which can help them manage the life stressors that may be contributing to their suicidality. On average, 245 Vermonters call the Lifeline a month.

Costs are for staffing a 24/7 program.

NCSS provides 63 hours of coverage per week. NKHS provides 105 hours per week. Both agencies submitted detailed budgets on the cost, which can be provided. NKHS has increased costs per hour due to night shift coverage.

**AHS/Net Neutral Items:**

**Transfer Funding To DVHA for Brattleboro Level 1 and CRT**

Gross: (\$13,000,000)                      General Fund Equivalent: (\$572,000)

This is to support the alternative payment model for the Brattleboro Retreat being paid for by DVHA. DMH will transfer the current appropriation for Level 1 and CRT inpatient costs to DVHA.

**Transfer Funding To DVHA for NFI Hospital Diversion Costs**

Gross: (\$202,051)                      General Fund Equivalent: (\$91,425)

This transfer to DVHA will support a new rate for the NFI Hospital Diversion program. DVHA contracted with Burns and Associates to assess the cost of this program and determined that the current rate does not cover the expenses. Currently, DMH supports this program with \$160,000 of Global Commitment Investment, and \$52,051 toward an incentive payment for achieving specific goals. This funding will be transferred to DVHA to cover the cost of the program.

**One Time Funds from FY 21 for Level 1 Cost Settlements**

Gross: \$430,000                      General Fund Equivalent: \$189,200

This is one-time funds that AHS carried forward for DMH to utilize for the RRMC Cost Settlement.