

- **Designated Provider for Chittenden County**
- **Designated Provider of Mental Health and Developmental Services**
- **Preferred Provider of Substance Use Services**
- **Additional Provider of Other Contracted Services**



**HOWARD  
CENTER**  
Help is here.



[howardcenter.org](http://howardcenter.org)





# OUR MISSION

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We help people and communities thrive by providing supports and services to address mental health, substance use, and developmental needs.

SERVING THE COMMUNITY SINCE 1865





## OUR VISION

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Howard Center is a national leader in the delivery of integrated and seamless community-based supports for individuals, families, and communities in need. Help is here.



## OUR VALUES

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- Clients are at the heart of our decision making.
- We are committed to individual and collective well-being and success.
- We are responsible stewards of the resources entrusted to us.
- We are steadfast in our practice and pursuit of excellence.



**26% of Vermont's population lives in Chittenden County.**



**159 years**

of service to the community

**1,530**

wonderful staff  
(when fully staffed)

**60+**  
locations

**50+**  
programs

**Serving 4 counties\***

- Chittenden
- Franklin
- Grand Isle
- Rutland

\*statewide

**19,000+**










people helped each year

**POPULATION TOTALS (2020): 168,323 in Chittenden County | 643,000 in Vermont**













# Who We Are

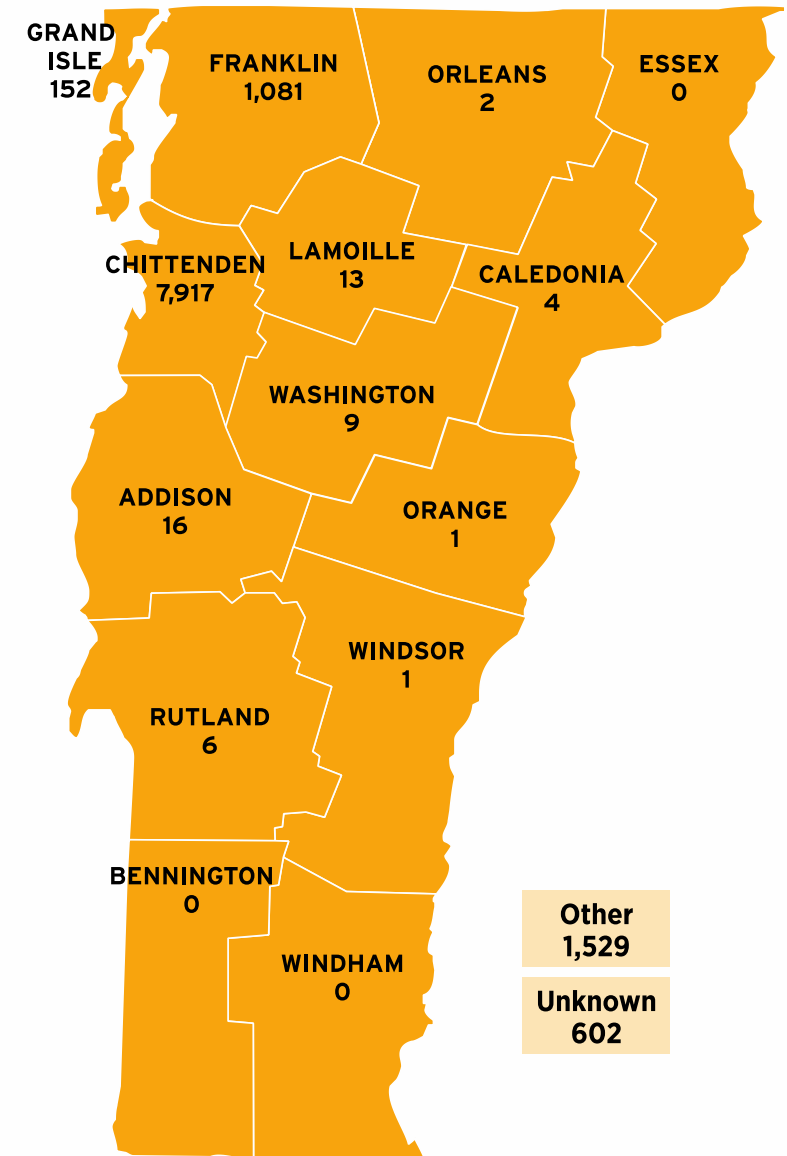
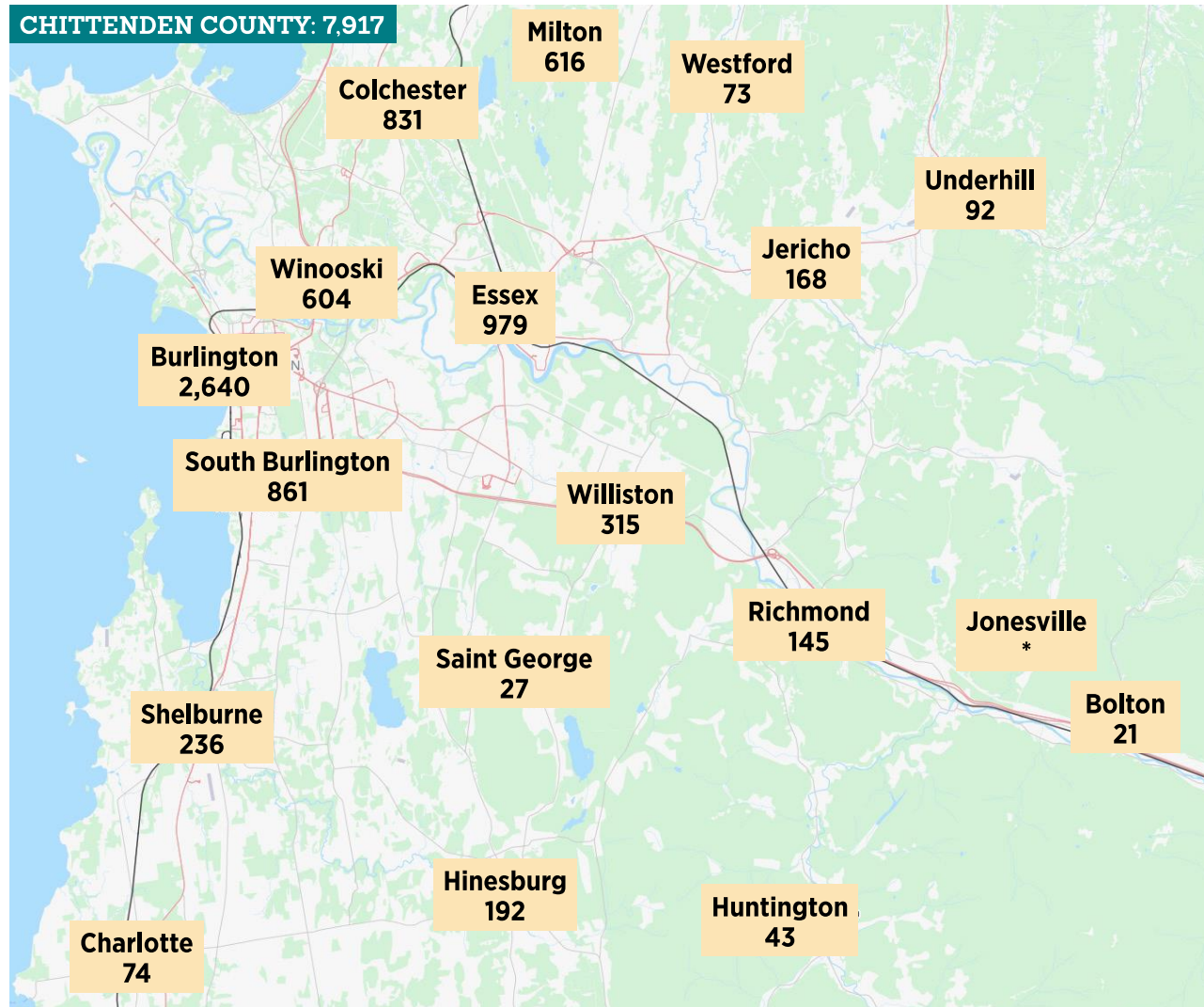
 <p><b>19,290*</b> Neighbors helped in FY23</p>	 <p><b>24/7/365</b> Round-the-clock service</p>	 <p><b>24/7/365</b> Howard Center Crisis Hotline</p>
 <p><b>220+</b> Shared living providers</p>	 <p><b>25</b> Residential homes</p>	 <p><b>3</b> Independent schools</p>
 <p><b>10,573,122</b> Total hours of service provided</p>	 <p><b>6th Largest</b> Employer in Chittenden County</p>	 <p><b>12th Largest</b> Employer in Vermont</p>

\* These numbers from FY23 include 10,900 individuals enrolled as clients and thousands of others who receive support and services from Howard Center, including our Community Outreach, Street Outreach, Safe Recovery, and crisis programs, without officially enrolling as clients.

# How We Help: Individuals Served

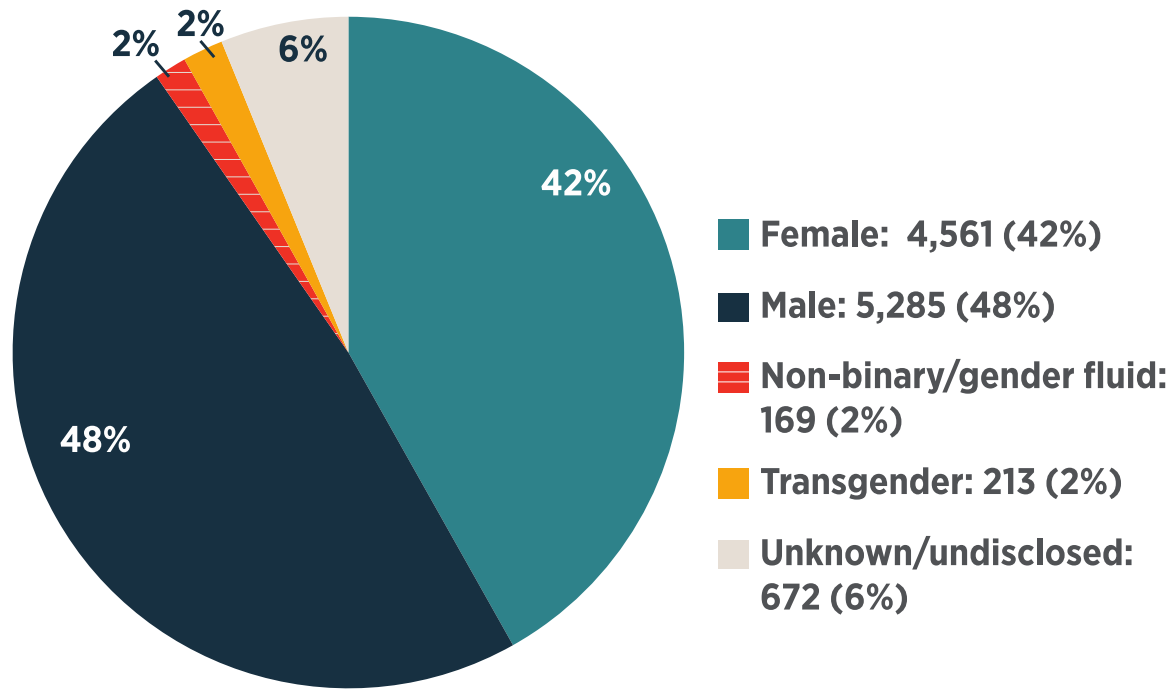
 <p><b>4,447</b> in Outpatient Services</p>	 <p><b>2,220</b> in Medications for Opioid Use Disorder Treatment</p>	 <p><b>4,073</b> in Crisis Services</p>
 <p><b>933</b> in Residential Services</p>	 <p><b>1,826</b> in School-Based Services</p>	 <p><b>2,237</b> in Community- Based Support</p>
 <p><b>457</b> in Employment Programs</p>	 <p><b>PLUS</b> other community members not enrolled as clients</p>	

# Who We Help — By Location

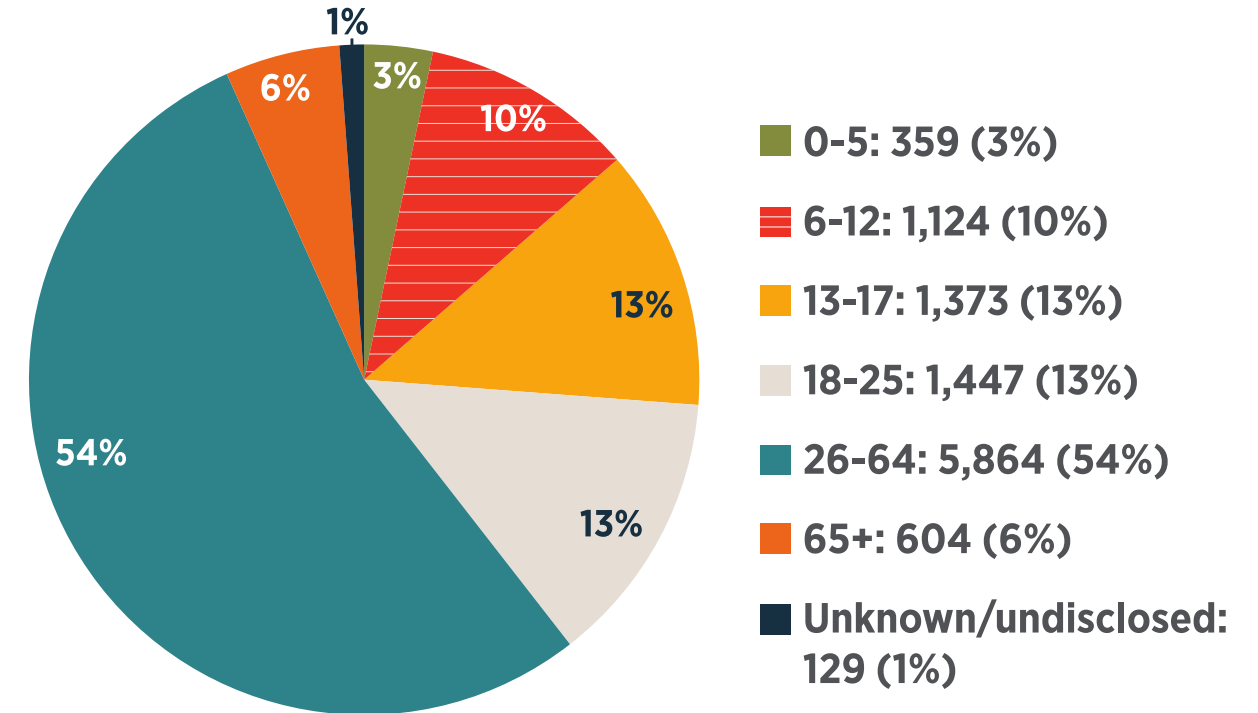




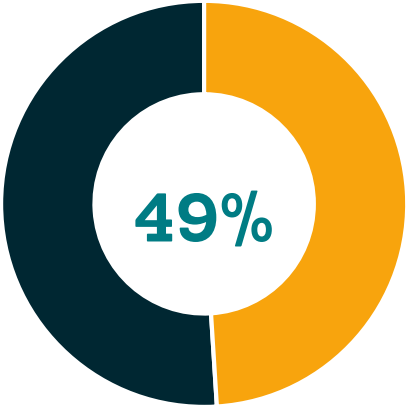
## Who We Help — By Gender



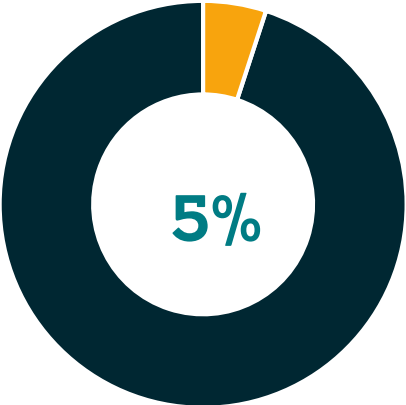
## Who We Help — By Age



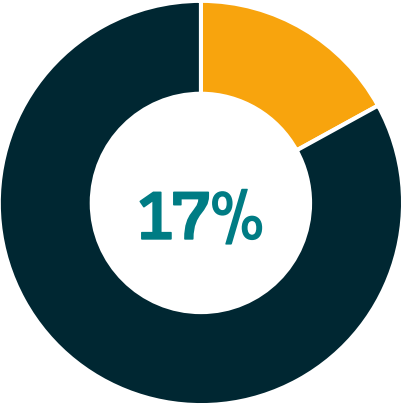
# Who We Help — By Service Category Needs



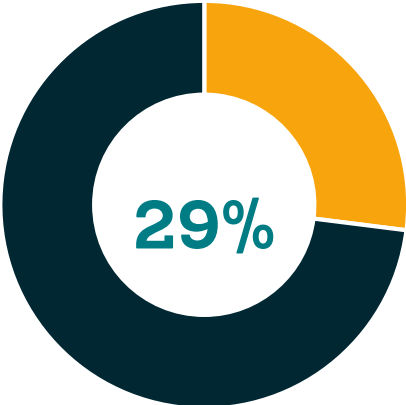
Mental Health Needs



Developmental Services\*



Substance Use Treatment



Have Multiple Needs

\*Our percentage of Developmental Services (DS) appears low in this illustration, but DS provided 268,125 of the total 727,496 services provided, or roughly 37% of all services.



## Vermonters served within Mental Health and Developmental Services (per calendar year)

Service category	2019	2020	2021	2022	2023	2024 Q1
Access/Intake	914	1,338	1,070	715	605	225
Adult Outpatient	1,043	621	653	467	423	282
Children, Youth and Families (CAFU)	2,343	1,100	1,047	1,063	1,034	624
Community Rehabilitation and Treatment (CRT)	635	612	587	582	561	483
Criminal Justice	89	62	70	87	96	62
Developmental Services	1,473	902	936	949	913	816
Emergency and Crisis Response Services	3,777	4,301	4,760	4,471	4,192	1,061
Peer Services	90	114	177	200	193	78
Substance Use Services	3,309	3,602	3,800	3,463	3,610	2,505
Success Beyond Six	1,089	1,204	1,203	1,255	1,297	1,006



# Diversity, Equity, and Inclusion

**Four-tiered, 13 objective Racial Justice strategic plan following the declaration of racism as a public health emergency in Chittenden County.**

- Data collection and demographic understanding
- Policy review
- Inclusive hiring and retention
- Education and skill development



## Other Initiatives:

- Nine informational videos in different languages about how to access services
- Mural collaboration

## Multicultural Liaisons:

- Embedded in Access and Intake to support accessible services to refugees and immigrants

**ANNOUNCING our Diversity, Equity and Inclusion (DEI) Curriculum Toolkit!**

Visit the Howard Center DEI SharePoint page to download toolkits on:

- Disability Justice
- Intersectionality
- Civil Discourse
- Juneteenth
- Bystander Intervention
- Cultural Humility

Questions? Reach out to [hcdiversity@howardcenter.org](mailto:hcdiversity@howardcenter.org) or call 802-488-6936.

**DOWNLOAD**

# Types of Services Offered

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- **Adult Outpatient Services**
- **Substance Use Services**
- **Emergency and Crisis Response**
- **Children, Youth and Families (CYFS)**
- **Community Rehabilitation and Treatment (CSP/CRT)**
- **Developmental Services**
- **Peer Services**
- **School Services**
- **Medical and Nursing Services**
- **Postvention Services**

**Adult Outpatient Services** serves adults (18 years and older) who do not meet criteria for Community Rehabilitation and Treatment (CRT) services. This includes a wide array of clients with a diverse and often an extremely acute clinical presentation and set of psychosocial needs.

**Services include:**

- Individual, couple, and group therapy
- Assessment services
- Care management/care coordination
- Psychiatry and medication management
- Eldercare services
- Multiple treatment courts and family court programs and services
- Intensive outpatient services
- Medication for opioid and alcohol use disorder
- Suicide treatment and prevention services
- Problem gambling treatment
- Sex offender services



# Substance Use Services – Howard Center provides an array of outpatient and intensive outpatient services for adults (18 years or older) struggling with Substance Use Disorders in Chittenden, Franklin, and Grand Isle counties.

## Services include:

- Medication for opioid use disorder: 800 clients (excludes Chittenden Clinic)
- Medication for alcohol use disorder: medication and therapy services
- Intensive outpatient services
- Individual, group and family therapy
- Mobile harm reduction services
- Harm reduction services
- Substance use disorder treatment court programs and services (state and federal)
- Contingency management for stimulant use disorder
- Problem gambling services
- Care coordination and outreach services

**Chittenden Clinic** is the largest opioid treatment program in the state and serves adults 18 years and older diagnosed with opioid use disorder who are seeking medication treatment (MOUD). We serve adults in both Chittenden County and throughout the state. We are the only methadone provider in Chittenden County.

**Services include:**

- Methadone and buprenorphine
- Nursing support and health promotion
- Care management
- Individual and group therapy
- Referrals to higher levels of care
- Service coordination
- Coordination with community MOUD providers
- Smoking cessation programs
- Hepatitis C treatment
- Harm reduction services
- Medication for alcohol use disorder treatment
- Partnership with UVMMC to support treatment access from the Emergency Department

Clients served:  
**1,271**

**Emergency Services** offers First Call for Chittenden County, a 24/7/365 hotline responding to over 26,000 calls, and providing over 4,000 in-person assessments among over 3,500 unique individuals in FY23.

### Services include:

- Phone, in-person, and telehealth services for all ages
- Crisis assessment, de-escalation, care coordination, and safety planning
- Information and referral to services
- Partnership with schools, first responders, providers, and other community members
- Suicide prevention trainings
- Postvention services: provide community response when there is a tragedy

- **Mental Health Urgent Care** clinic opening Fall 2024 in partnership with UVM Medical Center, Community Health Centers, and Pathways

### Common Presenting Concerns:

- Suicide (59%)
- Substance use (43%)
- Psychosis (45%)



**OUTREACH TEAMS** provide a wide range of services for individuals and families, including those with mental health, substance use, housing, or other social service needs. Howard Center's **Street Outreach** team serves Burlington and **Community Outreach** Team serves Colchester, Essex, Hinesburg, Milton, Shelburne, South Burlington, Williston and Winooski. People can self refer or referrals may be made by service providers, law enforcement, family, friends, merchants, and concerned members of the community.

### Services include:

- Support to individuals with unmet needs related to mental illness and substance use
- Collaboration with police and service providers
- Support to businesses in downtown areas



**Adult Crisis Stabilization**, formerly **ASSIST**, is a hospital diversion program and six-bed crisis stabilization program for any Chittenden County adult who is experiencing a psychiatric crisis. Adult Crisis Stabilization helps people remain in the community and avoid hospitalization or supports transitioning from an in-patient hospital stay or other inpatient setting to the community.

**Services include:**

- 24-hour staffing and support
- Psychiatric services
- Medication monitoring
- Family meetings
- Connection to counseling options and community services
- Transitional care coordination



**Community Rehabilitation and Treatment (CSP/CRT)** - The Community Support Program serves approximately 550 adults with serious mental health and co-occurring substance use challenges. Most individuals who are clinically eligible for treatment and support have Medicaid; however, the program can enroll individuals and provide treatment and support for individuals who do not have Medicaid. Criteria for the program are set by the Department of Mental Health. CSP is serving a mandated population. Services are individualized based on treatment, support needs, and goals.

**Services include:**

- Care management
- Medication management
- Psychiatry
- Nursing
- Employment support
- Peer and recovery services
- Individual and group therapy
- Skills work and community support
- Temporary and permanent supportive residential support

**Children, Youth and Families (CYFS)** – Howard Center provides an array of services which are family focused, strength based, and collaborative. These services span the ages of 0 to 22 and are delivered across settings, including in homes, schools, office-based, community, and through telehealth. This represents a designated population to service through state statute.

**Programs include:**

- Early Childhood and Family Mental Health Program (ages 0-6; and perinatal clients)
- Family and Community Programs (ages 4-22)
- Jump on Board for Success (JOBS) and Youth in Transition (YIT)
- Jarrett House: crisis stabilization support to children ages 5-13
- Transition House: residential home for CIS males ages 16-22
- Park Street: residential treatment for adolescent males, ages 13-18, with sexual harming behaviors



**Developmental Services:** Serves approximately 800 children and adults with an intellectual disability and/or autism. An individual must be clinically and financially eligible (individuals must be Medicaid eligible) for developmental services. Criteria for services are determined by the Developmental Disability Services Division and is a mandated population. Services are individualized based on treatment and support needs.

### Services include:

- Service coordination
- Supported employment
- Community support
- Residential/home services,
- Medication management
- Psychiatry
- Nursing
- Communication services
- Individual and group therapy
- Skills groups
- Peer supports
- Safety Connection (statewide)
- Person-Centered Thinking
- Transportation/ accessibility support and support with home modifications.
- Dialectical Behavior Therapy



**Peer Services:** provide peer support that is strengths-based and hope-driven. START peer specialists offer mental health recovery support services modeled on the national standards of practice set by SAMHSA and the National Association of Peer Specialists. Peer support services provide connection and encourage community building through regular engagement that incorporates the principles and tasks of Intentional Peer Support.

**Services include:**

- Peer Services utilize CNA (Collaborative Network Approach)
- Peer Services have formed the Psychosis Identification and Engagement Workgroup

\* START and CNA began in 2012



**School Services:** School Programs offer specialized and therapeutic supports, services, and education to children ages 3-21 with an emotional and/or behavioral disability.

**Services include:**

- School clinicians engaged in every school in Chittenden County
- 1:1 interventions in public schools
- Baird School, our K-8 alternative school
- Jean Garvin School, our 7-12 alternative school
- Fay Honey Knopp, our school affiliated with the Park Street program, serving adolescent males, ages 13-18, with sexual harming behaviors



## Medical and Nursing Services: provides direct clinical care and a broad range of expertise across programs.

### Providers include:

- 19 part- and full-time medical providers including psychiatrists, physicians, advanced practice nurses, and physician assistants
- 25 registered nurses in part- and full-time roles
- Fellowship-trained physicians and experts in the fields of community psychiatry, child and adolescent psychiatry, consult liaison psychiatry (medical psychiatry), forensic psychiatry, and addiction medicine

### Current initiatives:

- Improving and standardizing training for medication delegation across our residential programs
- Strengthening communication and collaboration with primary care services
- Strengthening educational offerings for our medical staff
- Training site for medical and nursing trainees including University of Vermont medical students and physicians-in-training

## Results-Based Accountability

- Over the past 10 years, we have collected over 17,000 client satisfaction surveys

## 2023 client satisfaction survey results

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89%

The services I received were right for me.

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82%

My quality of life improved.

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89%

The services I received made a difference.

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71%

The services provided by phone/video were as effective as in-person services.

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96%

Staff treated me with respect.

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91%

I received the help that I needed.

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## Program-Specific Outcomes

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- Baird School students maintained an average daily attendance rate of **87%**
  - **94%** of school partners reported INCLUSION provided a service not available through school
  - ASP builds capacity by providing BCBA supervision and expanding the workforce
  - School Services served **818** formal clients and **1,321** informal clients
  - **94%** of incoming First Call crisis calls were picked up within 0-5 min
  - **74%** of initial assessments do not result in referral to higher level care placement
-



## Program-Specific Outcomes (CONTINUED)

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- **94%** of clients admitted to Jarrett House are discharged to a lower level of mental health care
  - Park Street clients are tracked for five years after discharge — past three years: **0%** recidivism
  - After JOBS program, **85%** were better able to gain and/or retain employment
  - Eyberg Intensity Scores at Pre-and Post-PCIT treatment demonstrated stress/challenges decreased by an average of 58 points with **59%** reduction in challenging behaviors within the family
  - In FY23, **74%** of Chittenden Clinic clients were retained in treatment 90 days or more
-

# Indicators of Health and Wellness



of clients were housed



of clients were rated “improved” at discharge from Howard Center services

# How Well We Meet Client Needs



of clients were offered a face-to-face appointment within five days of initial contact



of clients were seen for treatment within 14 days following their assessment

Percentage of new clients who were screened for:	FY22	FY23
• Depression	69%	70%
• Substance use problems	84%	87%
• Domestic violence	99%	99%
• Trauma history	93%	94%

## DA/SSA System Needs

- Continued legislative support for **rate increases** to maintain essential services for vulnerable Vermonters
- Need for **predictable, flexible and sustainable funding**
- Investments in the broad system of care and **upstream, preventative services** which have long-term cost savings and essential to the global health of Vermont
- Investment in **affordable housing** for the population we serve as well as general housing for new staff relocating to and around Vermont
- Reduction in **administrative burdens** which decrease availability to provide clinical services
- **Support current underfunded programs** to maximize availability prior to new initiatives that replicate services that are currently being provided

## Agency Challenges

- **Complexity and acuity** of client presentations and layering of psychosocial needs
- Eligibility **criteria changes**
- **Aging population** with complex medical needs
- Need for long-term, stable supported **housing options** for individuals with mental health, medical, and behavioral support needs
- **Increase in referrals** from families with commercial insurance for in-home family work — often not reimbursable under their insurance programs
- **Chronic homelessness and economic challenges**; difficult to be well with focus on meeting basic needs
- School systems are struggling to meet the **needs of our students** with the most intense challenges

## Agency Challenges (CONTINUED)

- **Limited childcare and afterschool programming** for children with challenging behaviors
- Need for predictable, flexible, and sustainable **funding**
- **Reimbursement rates** that do not match cost to provide services
- **Workforce and recruitment challenges** across program—some programs more challenging to recruit 24/7 residential; crisis; interventionists
- Clinical staff leaving for private practice due to **compensation and administrative burden**
- Administrative burden of **paperwork**: demographics, outcomes, documentation; extremely difficult when client in crisis
- Lack of available **housing** for both clients and new staff
- Language and cultural barriers when serving the **refugee and immigrant communities** (largest resettlement population lives in Chittenden County)



## Agency Challenges (CONTINUED)

- **Limited public transportation** options for clients to access services
- Vermont Office of Professional Regulation **rule changes/roster limits**
- No current statewide **Peer Services certification process**
- Collaborative Network Approach is **unfunded**
- **Treatment access**, including transportation is a critical barrier
- **Fentanyl** and **Xylazine** causing increases in overdoses and medical needs (wound care)
- Navigating conflict-free **case management**
- Suspension of **ACT 1/Bridge** due to workforce shortages, medical needs beyond social detox, and lack of funding
- **Closure** of programs in 2023

# Standardized Outcome Assessment Tools

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- National Outcomes Measures (NOMS)
- Level of Care Utilization Score (LOCUS) for residential services
- Children and Adolescent Needs and Strengths (CANS)
- Adult Needs and Strengths Assessment (ANSA)
- Evidence-based, practice-specific measurements
- Eyberg Child Behavior Inventory (ECBI)
- Child Behavior Checklist (CBCL)
- Adaptive Behavior Assessment System (ABAS)
- Early Multi-Tiered Systems of Support assessment tools (EMTSS / ECFMH)
- Supports Intensity Scale (SIS)

## Screening tools:

- PHQ-9, PHQ-A depression screening
- PC-PTSD 5
- CRAFFT/CAGE alcohol screening

## Standardized Outcome Assessment Tools (CONTINUED)

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- Measures of academic progress
- IXL analytics
- STAR math assessment
- Dynamic indicators of basic early literacy skills
- Fountas and Pinnell (literacy)
- DESSA Aperture System (social emotional learning)

# Evidence-based Practices

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- Collaborative Assessment and Management of Suicidality (CAMS)
- Cognitive Behavioral Interventions (CBT)
- Cognitive Behavior Therapy (CBT) Dialectical Behavior Therapy (DBT)
- Eye Movement Desensitization & Reprocessing (EMDR)
- Feedback Informed Treatment (FIT)
- Motivational Interviewing (MI)
- Medication for Opiate Use Disorder (MOUD)
- Mental Health First Aid/Youth Mental Health First Aid
- Parent/Child Interaction Therapy (PCIT)
- Parent/Child Psychotherapy (PCT)

# Annual Budget: \$133,104,390

**AGENCY ADMINISTRATIVE RATE = 8.88%**



MEDICAID	86.6%
OTHER STATE	7.0%
OTHER FEDERAL	1.0%
LOCAL/PRIVATE	5.4%

COMMUNITY BASED SERVICES	54%
CRISIS SERVICES	7%
OUTPATIENT SERVICES	4%
RESIDENTIAL SERVICES	16%
SCHOOL BASED SERVICES	19%



WORKFORCE	89%
PROGRAM/OPERATIONAL SUPPORT	11%



## FY24 FINANCIAL SUMMARY

Howard Center is significant to the region as an employer and as a service provider. Our FY24 budget of over \$133M includes complex, multiple funding streams. Over 95% of our services are funded through the state. 89% of our budget is allocated for our workforce in direct support of the people we serve.

**While our scope and services are essential, many of our programs are not funded adequately.**

This disparity requires that we continue to depend on grants, private donations, and entrepreneurial initiatives to bridge the gap.



# Revenue By Payer

## Revenue Payer Mix

- Medicaid
- Medicare Blue Cross/Blue Shield
- Cigna/Evernorth
- MVP
- UBH

Revenue Source	Amount Paid	Percent
Medicaid	\$113,110,212	85%
Medicare	\$1,016,207	0.8%
Insurance	\$761,886	0.6%
Self-Pay	\$521,056	0.4%
Service Contracts	\$6,064,250	5%
State & Federal Grants	\$10,201,301	8%
Other Income	\$798,996	1%
<b>HC Total</b>	<b>\$132,473,909</b>	<b>100%</b>

## Several programs are supported by grant funding:

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- SAMHSA Certified Community Behavioral Health Clinic (CCBHC) planning, development, and implementation grant for Chittenden County
- SAMHSA Medication-Assisted Treatment – prescription drug and opioid addiction grant
- Community Mobile Crisis Services
- Mental Health Crisis Specialist
- CDC health disparities

# Agency Funding Overview

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Funding covering costs: Developmental Services Waiver; School Services (Success Beyond Six)



Funding not covering costs/operating at a deficit: Mental Health Services; Substance Use Disorder Services; Private Non-Medical Institute (PNMI) Programs



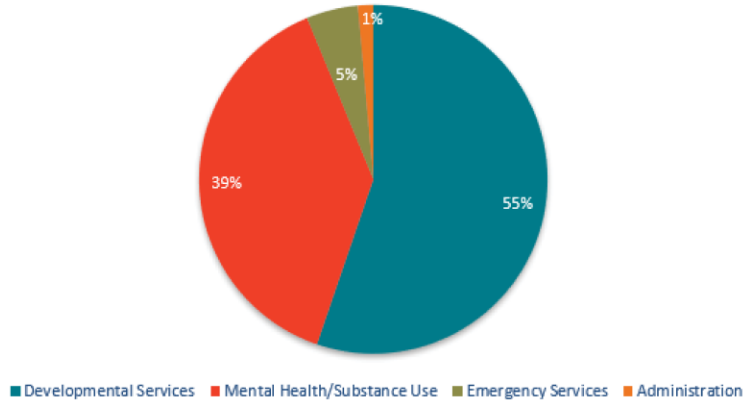
Second consecutive year agency is operating at a financial deficit



Low reserves: operating cash on hand averages 18 days with a range spanning 7–28 days

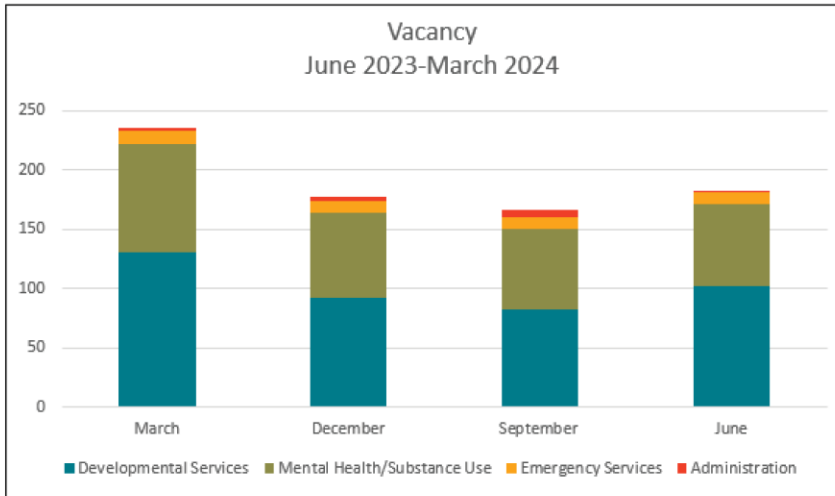
# Human Resource Vacancy and Turnover Rate Data

Vacancy as of March 2024

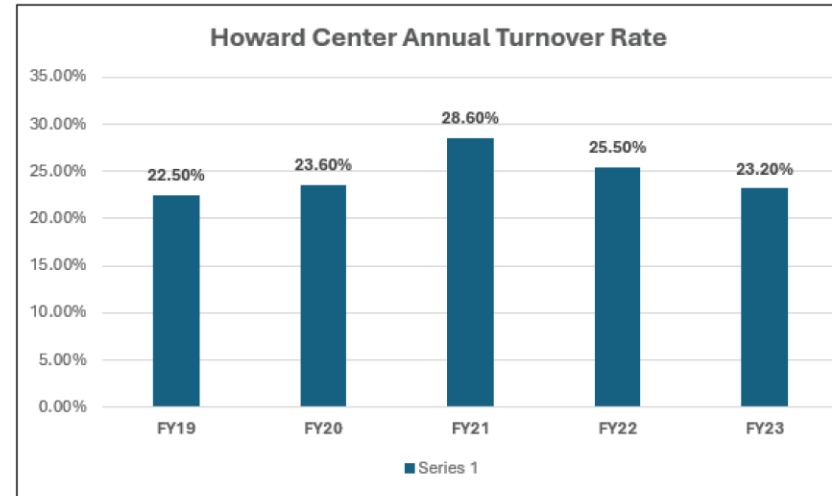


Howard Center Vacancy Rate	
TOTAL Vacancies as of 3/31/2024 (FT/PT)	236.47
MH and SUD Vacancies	90.93
vacancy rate %	12.42%
DS vacancies	130.38
vacancy rate %	26.36%
Emergency Services	11.29
vacancy rate %	35.05%
Other (Admin, etc.)	3.36
vacancy rate %	3.13%
Total positions if fully staffed	1,384.74
Total overall vacancy rate	17.10%

Vacancy  
June 2023-March 2024



Howard Center Annual Turnover Rate



**Most challenging positions to recruit:**

**Direct Support Professionals in DS; clinicians, leadership**

**Most effective recruitment strategy:**

**In-person hiring events**

**Innovative retention tactic:**

**GENEROUS BENEFIT PACKAGE:**

- 36 paid days off per year for new staff
- retirement plan employer contributions
  - robust health insurance
  - wellness program
- strong focus on work life balance via our Flexible Work Arrangements for eligible positions

# Committed to Community Education

## Resources About Suicide

**Workplace Considerations After a Suicide or Other Unexpected Death**  
A HANDBOOK

Published on 11/15/2017, this booklet is the resource to a variety of unexpected death that has occurred in the workplace or community.

CHL HOWARD CENTER

**Workplace Considerations After a Suicide or Other Unexpected Death**

*As a Business Owner / Workplace Supervisor, you may be faced with a variety of challenges or questions in response to a suicide or unexpected death in the workplace.*

To address workplace issues, you may find this handbook a valuable resource and tool to help control the workplace situation.

**Not sure where to start?**  
Call (802-488-7777) Howard Center  
802-488-8000

First Call 802-488-7777

**Workplace Considerations After a Suicide or Other Unexpected Death**  
PUBLIC STATEMENTS & MEDIA

This 7-page checklist provides for recommendations and individual considerations when addressing the media and the community about a suicide or other unexpected death in the workplace.

CHL HOWARD CENTER

**After a Suicide: Postvention Steps Quick Guide**

01. Notify the police
02. Notify the coroner
03. Notify the medical examiner
04. Notify the funeral home
05. Notify the employer
06. Notify the community
07. Notify the media
08. Notify the family
09. Notify the neighbors
10. Notify the neighbors
11. Notify the neighbors
12. Notify the neighbors

CHL HOWARD CENTER

**HOWARD CENTER**  
Help is here.

**CHL**  
CENTER FOR HEALTH AND LEARNING  
HEALTHY LIVING MATTERS

# Firearm safety can save lives.

**Firearm locks - free and simple to use!**

**LEARN MORE**

**HOWARD CENTER**  
Help is here.



# Committed to Community Education

## 2017 - 2023 ANNUAL CONFERENCE STATS

Attendee Data	2017 Gabor Maté	2018 Opiates	2019 Adversity	2021 Connection	2022 Vision	2023 Breaking Barriers
Total attendees	374	360	386	356	513	567
Geographic reach	4 states and Canada	11 states	6 states	9 states	13 states and UK	8 states

### 6TH ANNUAL CONFERENCE

# BREAKING BARRIERS

Finding Purpose & Possibilities Together



Nadine Burke Harris, MD



Dacher Keltner, PhD



BJ Miller, MD



Jeffrey Swanson, PhD



Anna Malaika Tubbs, PhD

April 19, 2023 | 8:30am-4:30pm | DoubleTree by Hilton Hotel, Burlington VT

HOWARD CENTER presents:

## THE MARNA AND STEPHEN WISE TULIN SPRING COMMUNITY EDUCATION SERIES

FREE AND OPEN TO THE PUBLIC

### WHAT PEOPLE ARE SAYING:

“The presenters were real, relatable, and had important backgrounds and experiences to share.”

“Thoughtful, informative, easy access”

“I loved the presentation. It very much resonated with some of the struggles I have been having lately.”

“Great film. Great speakers. Super important topic.”

### 2015-2023 STATS

**4,101**  
total attendees

**137**  
experts in the field  
presented

**91%**  
reported they learned  
something from attending

**89%**  
would recommend the  
presentations to others

**77**  
average attendees per session

**53**  
total sessions





# Agency Strengths

- Our committed and dedicated **staff**
- Depth and breadth of our **programming**
- Commitment to controversial lifesaving **harm reduction services**
- **Care across the lifespan** (early childhood to eldercare)
- **Strategic partnerships** with providers, municipalities, law enforcement, and the business community
- **Diversity, Equity, and Inclusion** infrastructure and interagency sharing



*Howard Center staff greeters at the 2023 summer celebration*



*Howard Center staff at the 2023 pride parade and festival*



## Agency Strengths (CONTINUED)

- Committed and engaged **Board of Trustees**
- **Exceptional staff benefit package** including 36 paid days off and an agency wellness program
- **Multicultural Liaison** program
- **New Lakeview House** in Shelburne
- **Leadership** with MOUD statewide
- Free **postvention** services
- Howard Center annual **conference**



*Attendees at the 2023 Spring Conference*



*Lakeview House, March 2024*



## Agency Strengths (CONTINUED)

- **Dynamic electronic health record** that allows for tracking key performance indicators
- Ongoing **quality improvement efforts** to improve care
- **Robust business operations** and infrastructure to support programming
- Established **community education, marketing,** and **media-relations** efforts
- **Biennial staff culture and climate survey** to identify strengths and areas for improvement
- **Experienced leadership team** and senior staff
- **Accreditations** like CARF, NCQA, Centers of Excellence, SAMSHA
- **Substance use/harm reduction services mobile unit** serving rural locations
- **Success with grants** (CCBHC, MHUC, MAT, PDOA)
- Strong **internship program** with local colleges and universities (30-40 per year)

## Agency Strengths (CONTINUED)

- **Hundreds of good things happen here every day, supporting people in our community!**



**HOWARD  
CENTER**  
Help is here.

We respect **WOMEN, MEN** and **NON-BINARY PEOPLE** • We value **BLACK LIVES** • We stand with our **LGBTQIA+ COMMUNITY MEMBERS** • We celebrate **CHILDREN** • We stand with **IMMIGRANTS, REFUGEES, INDIGENOUS PEOPLES**, and **PEOPLE OF ALL FAITHS and ETHNICITIES** • We support **INDIVIDUALS** and **FAMILIES** challenged by mental health, substance use, and developmental disabilities.

*We stand with our **COMMUNITY**.*

الجميع مرحب به هنا • Tất cả đều được chào đón ở đây  
Tout le monde est le bienvenu ici • အားလုံးကို ဒီနေရာမှ ကြိုဆိုပါတယ်  
Dadka kulushoo ha dhawaatheen • Ovdje su svi dobrodošli

歡迎各位 • Dhammaan waa la soo dhaweynayaa  
Wote wanakubaliwa hapa • Todos son bienvenidos aquí  
Сви су добродошли овде • མི་ཚང་མ་ཕེབས་པར་དགའ་བསུ་ཡོད།

सबै जनालाई यहाँ स्वागत छ।

**HATE HAS NO BUSINESS HERE.  
All Are Welcome Here.**

Adapted from a poster courtesy of The Main Street Alliance #HateHasNoBizHere



# Thank you!

