

# NKHS – Alternatives to the ED

*'Front Porch' Mental Health Treatment Program*

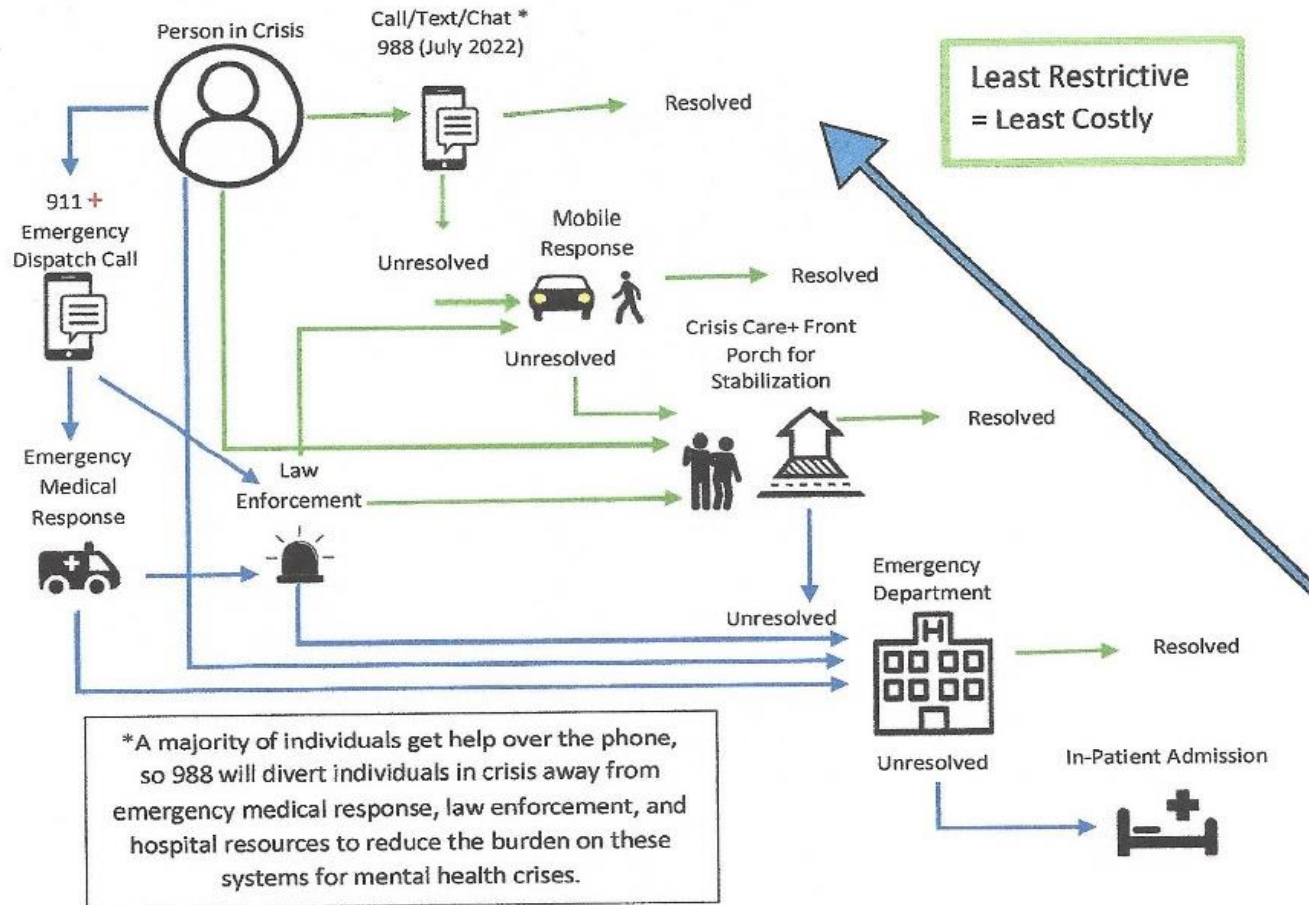


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# Ideal Roadmap to Crisis Care

Model came from [Missouri Crisis model](#)

Crisis Care+ Response (Crisis Receiving and Stabilization Front Porch to Living Room Model)

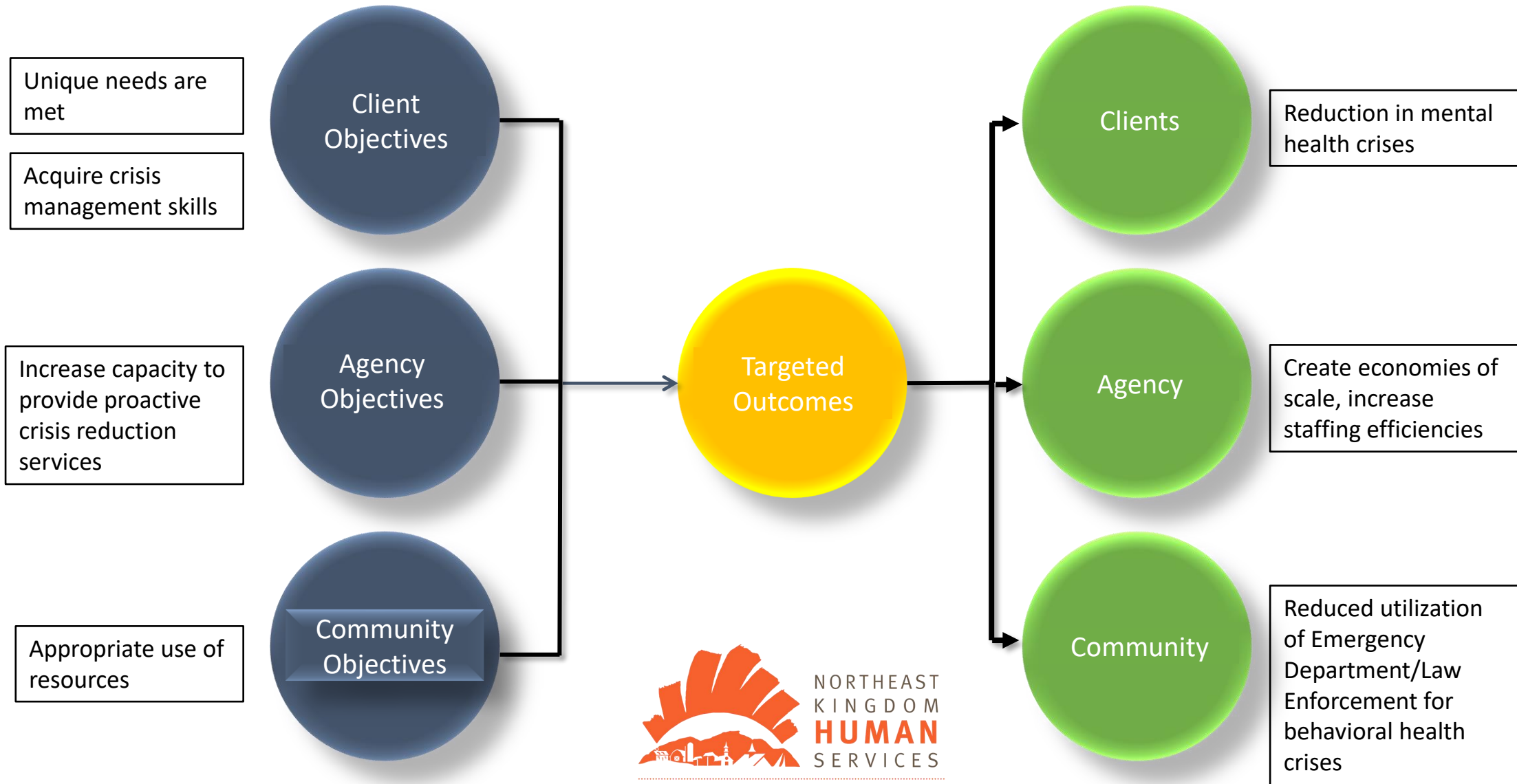


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# Roadmap to Crisis Care

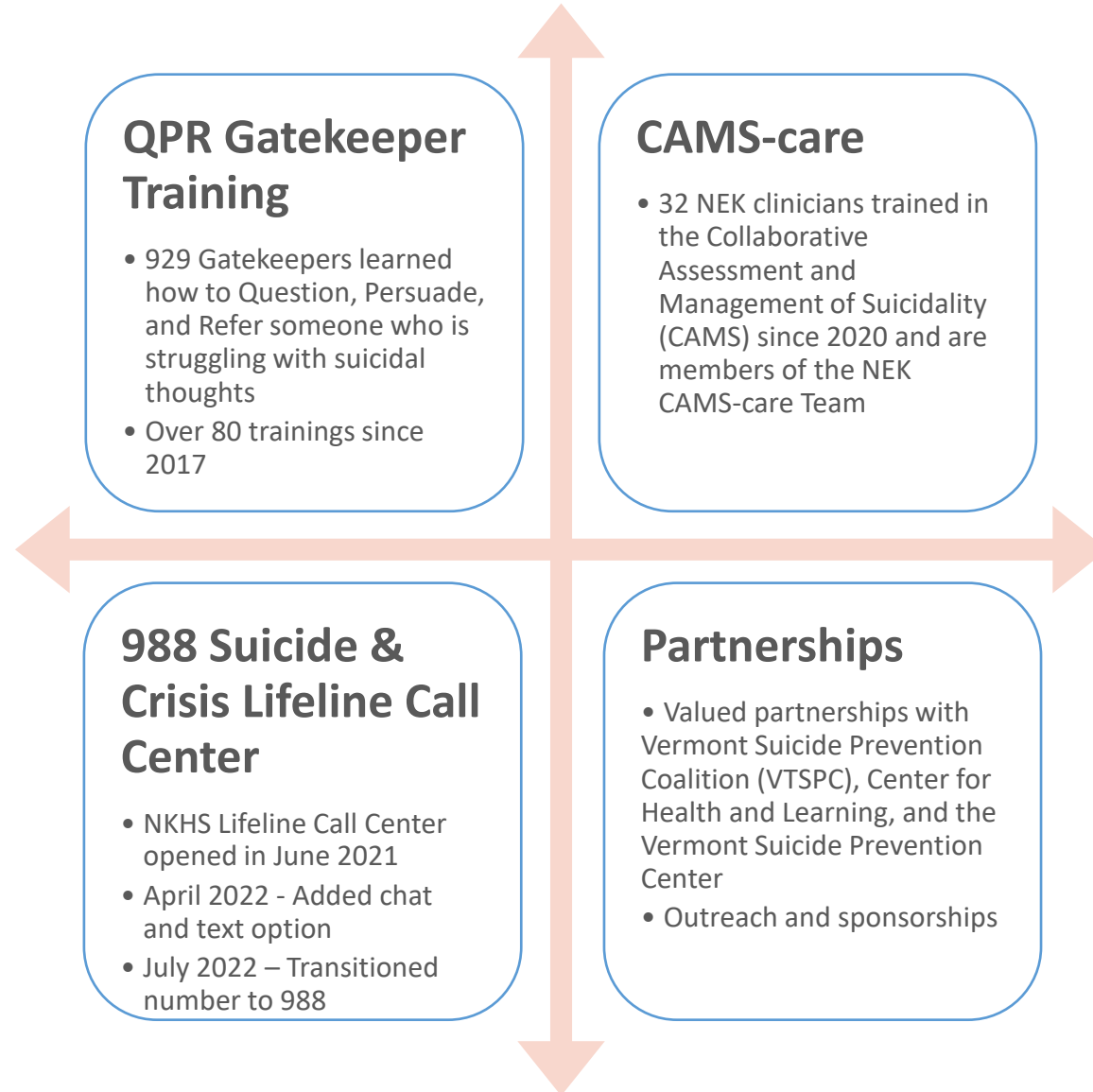


# Project Objectives/Outcomes



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# Community Based Prevention



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# Mental Health Treatment Facility

## Front Porch Crisis Care+

The Northeast Kingdom does not have a dedicated first responder drop off location for individuals in a non-medical crisis other than utilizing the hospital emergency departments.

### **The proposed mental health treatment facility will:**

- provide persons in distress immediate access to a continuum of crisis response services
- reduce the number of emergency departments visits for people with mental health as their primary diagnosis
- provide programming specifically for individuals experiencing suicidal ideation or in a mental health crisis
- provide crisis stabilization, best practice interventions such as Dialectical Behavioral Therapy (DBT), Collaborative Assessment and Management of Suicidality (CAMS), and other clinically indicated supports
- include licensed clinical professionals, direct service professionals, and peers with access to nursing, psychiatric, and medication management services.



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# Connection to other services

- 988 Call Center (Text and Chat)
- CRT
- CFYS
- Co-Occuring Services
- Embedded MH Specialists with Law Enforcement
- Same Day Access
- Embedded positions with Law Enforcement
- Outpatient Services
- CCBHC – NKHS and 3 other agencies received a 4 year planning grant
- Mental Health Urgent Care (MUCI)
- Psychological Urgent Care for Kids (PUCK)



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# Challenges & Opportunities

## DEMAND FOR SERVICES HAS NEVER BEEN HIGHER

- Our children are struggling in school after prolonged social isolation
- Over 40% of Americans are experiencing depression and/or anxiety
- Vermont's suicide rate exceeds the national average by 30% and is rising (some of the highest rates in the state are in Caledonia and Orleans County)
- Vermont's alcohol, opioid, and other drug use greatly exceeds the national average (The highest rates of alcohol use in Vermont are in Orleans County)
- Nearly 1,000 Vermonters are waiting for our agency mental health and substance use services
- Agency emergency services use rose from just over 7,000 in FY19 to well over 9,000 in FY21
- Children and adults, including people with intellectual and developmental disabilities (I/DD) and autism, in mental health crisis are stuck for days in hospital emergency departments
- Almost 300 people with I/DD and autism are waiting for or at risk of losing their homes



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# Challenges & Opportunities

## THE WORKFORCE CRISIS CONTINUES

- In FY22 33.6% of staff at VCP network agencies left their jobs
- Agency vacancy rates are hovering at 18% (NKHS is at 16%)
- Some I/DD programs have vacancy rates as high as 50% to 60%
- Staff love their work but leave for higher pay at schools, hospitals, and other employers
  - The number one reason staff said they would leave their job on NKHS's most recent culture and climate survey was due to pay.



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# Legislative Request

- **Support the Front Porch Programming by approving this funding**
  - Having a support that fills a needed gap provides a proven alternative to the Emergency Department.
  - Ultimately saves resources by investing in targeted, therapeutic services
- **Increase Medicaid rates by 10%**
  - Ensure DAs/SSAs have flexibility to apply these increases
  - Solidifies and supports services that already exist and are making a difference
  - Is an upstream investment in preventative services, which are ultimately more cost effective.



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