

Thank you for having me, I am Breena Holmes, a pediatrician and president of the American Academy of Pediatrics Vermont Chapter. I was the Maternal and Child Health Director at the Vermont Department of Health from 2010-2021. I am here today to speak to you about the **need to continue the Blueprint Expansion Pilot** with particular attention to the proven, primary prevention approach- DULCE (Developmental Understanding and Legal Collaboration for Everyone) This expansion pilot has served as an integral support to primary care to provide necessary funding for practices to provide the mental health and substance use care that patients desperately need.

With a high number of patients seeking mental health and substance use care in the primary care practice, psychiatric units closing and emergency departments overrun, much of the responsibility for care is in the primary care office, that is why it is so important that we as a state continue to fund a program that has supplied to integral supports to provide this care, make the appropriate referrals and efficiently coordinate the care.

For more information about the results of the pilot, please see full presentation by John Saroyan, MD, Executive Director of the Blueprint for Health [here](#).

For those of you that were here two years ago, you may remember that part of the Blueprint expansion pilot was to include expanding an existing pilot program for pediatric practices called **DULCE - Developmental Understanding and Legal Collaboration for Everyone**. DULCE promotes optimal health for children and families, by responding to social determinants of health and promoting family strengths- a rare, universal and truly upstream approach in Vermont, which I will describe shortly. The pilot funding will end this year without legislative action. While the Governor's SFY2026 Recommend allows carry over funding to be used for the pilot for a third year, there is no funding allocated and it is unclear how much carryover is available – this pilot is needed, including specific direction to support DULCE in pediatrics practices, some of which have been serving new babies since 2016.

### **DULCE is a proven solution to complex challenges facing Vermont families**

In our search for opportunities to connect Parent Child Centers, pediatric primary care and legal teams working with families, we brought the DULCE approach to Vermont in 2016. We started in the Lamoille Valley and have grown to 9 sites serving the largest percentage of new babies in Vermont.

Our funding began braided together through public health federal grants, OneCare Vermont and most recently part of the **Blueprint expansion pilot as a successful primary prevention strategy in our health reform efforts**.

**DULCE** is a **universal** program offered to all babies 0-6 months in a participating pediatric primary care practice. The program connects all families with infants-particularly those struggling with limited resources- to a local community's system of care and supports by integrating **pediatric, legal and early childhood services**. A DULCE Family Specialist is teamed with the provider at all well-child visits, asks families about social needs and issues, and helps connect patients and their family members to concrete supports in the community. The family

specialist also works closely with the Children's Integrated Services to ensure consistent messaging and warm hand-offs should the family continue to receive services beyond the infant's 6-month birthday.

### **Why Focus on Families with Infants in Primary Care?**

- Families with infants face predictable stressors
- Babies are developing their emotional and relational foundation and are particularly susceptible to families' experiences of chronic stress and unmet needs
- Almost all VT families seek child healthcare and have multiple well visits in first year
- Routine healthcare for infants seeks to address the social determinants of health and parental mental health needs.

### **Innovative Care Delivery**

- Evidence-based program combining key elements from several other approaches
- All families screened for SDOH
- Offers family-centered support and concrete resources
- Joint decision-making with parents
- Structured collaboration with other community providers
- **Improves the work life of health care professionals**

### **Improving Population Health and Social Determinants of Health**

- Universal for families with infants in the pediatric primary care / medical home
- Proven results in providing access to concrete supports (e.g. food pantry, SNAP, WIC, telephone services, utility discounts, legal assistance)
- Identification of and impact on system-level barriers to accessing concrete supports (i.e. Medicaid, transportation)

### **Controlling Costs**

- Focus on families with infants to reduce risks associated with higher costs
- Reduced emergency department visits and increases use of preventive services
- More complete and efficient referrals
- Better outcomes, quality and lower costs overall
- Cost avoidance and proven Return on Investment (ROI)

### **Voices from the field:**


- ✚ *"DULCE provides emotional support to families who may be feeling overwhelmed in this new addition and alteration to their family routine." DULCE Provider*
- ✚ *"This is **why I became a pediatrician: to address the things that really matter for families** and children. Through DULCE, I can." -pediatrician*
- ✚ *"This program has **made us feel safe, heard and supported in every way possible...** [Our family] now has the opportunity to thrive in the face of the chaos that is our life at present." (DULCE family)*

We so appreciate this committee's commitment over the years to primary care and prevention! The continuation of pilot funding is integral to the success of primary care serving patients with mental health and substance use disorders as well as working to prevent these health concerns in future generations. Again, while the Governor's SFY2026 Recommend allows carry over funding to be used for the pilot for a third year, there is no funding allocated and it is unclear how much carryover is available – this pilot is needed, including specific direction to support the six original DULCE practices. Thank you for your time.




## Why the three sectors?


- **Accountable** for building a local system for young children and their families.
- **Immersed** in the community's supports to address SDOH.
- Able to drive **evidence-informed** practices and programs.
- **Organized** to influence policy and practice.

**Early Childhood** 

- **Universal reach.**
- **Longitudinal relationships** with families.
- Well-versed in the use of standard protocols to improve **quality of care.**

**Health** 

- Well-versed in **family rights and system responsibilities.**
- Professional orientation toward **problem-solving and advocacy.**
- **Policy lens and expertise.**

**Legal** 



Red: TPEC funded  
Blue: Blueprint funded

## Vermont's 9 DULCE Sites

- Lamoille Family Center ●● Lamoille Health Partners
- Lund ●● Timber Lane Pediatrics South Burlington
- Lund ●● Timber Lane Pediatrics North Avenue
- Northeast Kingdom Community Action ●● North Country Pediatrics
- Northwest Counseling & Support Services ●● Timber Lane Pediatrics Milton
- Springfield Area Parent Child Center ●● Mount Ascutney Pediatrics
- Northwest Counseling and Support Services ●● Monarch Maples Pediatrics
- Northeast Kingdom Community Action ●● St. Johnsbury Pediatrics
- The Family Room ●● Community Health Centers -Riverside

## Key DULCE Resources

- Sege R, Preer G, Morton SJ, et al. Medical-legal strategies to improve infant health care: A randomized trial. *Pediatrics*. 2015;133(1):97-106. doi: [10.1542/peds.2014-2955](https://doi.org/10.1542/peds.2014-2955) Available at: <https://www.ncbi.nlm.nih.gov/pubmed/26034248>
- Center for the Study of Social Policy. DULCE. (Website). 2021.
- Fine A & Hampton P. *DULCE: A review of impacts and insights - Lessons from the field on bringing together health, legal, and early childhood partners to reach families of infants in the first six months of life*. Center for the Study of Social Policy. September 2019. Available at: <https://cssp.org/wp-content/uploads/2019/06/DULCE-Impact-and-Insights.pdf>
- Arbour MC, Floyd B, Morton S, et al. Linking pediatric primary care and systems: DULCE expansion via quality improvement advances patient-centered care and addresses health-related social needs. *BMJ Open Quality*. 2019; 20(Suppl 2): A1-A51. doi:10.1136/bmjopen-2019-ihj.20. Available at: [https://bmjopenquality.bmj.com/content/8/Suppl\\_2/A32](https://bmjopenquality.bmj.com/content/8/Suppl_2/A32)
- Johnson K. *Enhancing Medicaid Financed Primary Care for Babies with DULCE*. Factsheet prepared for the Center for the Study of Social Policy. March 2019. Available at: <https://drive.google.com/file/d/1jqImFBMnJA0vw0q35WtaLCTpWQmSD-l7/view?usp=sharing>
- Manatt Health. *Potential Medi-Cal Cost Savings Through DULCE*. Analysis prepared for the Center for the Study of Social Policy. February 2019. Available at: [https://drive.google.com/file/d/1o0FqGI3qWBU\\_q6khcjEwxjNkY12nXGfn/view?usp=sharing](https://drive.google.com/file/d/1o0FqGI3qWBU_q6khcjEwxjNkY12nXGfn/view?usp=sharing)
- McCrae JS, Robinson JAL, Spain AK, Byers K, & Axelrod JL. The Mitigating Toxic Stress study design: Approaches to developmental evaluation of pediatric health care innovations addressing social determinants of health and toxic stress. *BMC Health Serv Res* 2021;21(1)71. Available at: <https://doi.org/10.1186/s12913-021-06057-4>
- Chapin Hall at the University of Chicago. *Healthcare and Early Childhood System Integration in Practice*. Evaluating Community Approaches to Preventing or Mitigating Toxic Stress Project. Research Brief 4. January 2020. Available at: <https://www.chapinhall.org/wp-content/uploads/PDF/Healthcare-and-early-childhood-systems.pdf>

## Select Vermont DULCE Resources

- Lamoille Family Center. DULCE. (Website). <https://www.lamoillefamilycenter.org/our-programs/dulce/>
- Northwestern Counseling & Support Services. Early Childhood Support: DULCE. (Website). <https://www.ncssinc.org/children-youth-family-services/parent-child-center-program#Early%20Childhood%20Support>
- The Family Place. Project DULCE. (Website). <https://www.familyplacevt.org/project-dulce/>
- OneCare Vermont (Vicki Loner). *DULCE Report for the Joint Meeting with the House Committee on Health Senate Committee on Health and Welfare*. January 17, 2020. Available at: <https://legislature.vermont.gov/Documents/2020/WorkGroups/Senate%20Health%20and%20Welfare/ACO/W~Vicki%20Loner~OneCare%20DULCE%20Report%20for%20Joint%20Meeting%20with%20the%20House%20Committee%20on%20Health%20and%20the%20Senate%20Committee%20on%20Health%20and%20Welfare%20January%2017%202020~1-17-2020.pdf>