As part of Integrated Family Services, Vermont has created a unique model for integrating early childhood health, mental health, evidence based home visiting, early intervention and specialized child care services for pregnant and postpartum women and children birth to age six. The model is designed to improve child and family outcomes by providing family-centric holistic services, effective service coordination, flexible funding to address gaps in services, prevention, early intervention, health promotion, and accountability.

**EARLY INTERVENTION**
Services for children from birth to age 3 with a developmental delay or medical condition that may lead to developmental delay.

**NURSING AND FAMILY SUPPORT**
Services for pregnant and postpartum women and young children who have concerns about conditions or risk situations that impact healthy family development.

**EVIDENCE BASED HOME VISITING**
An intentional program of regular, voluntary visits by a trained professional with a pregnant woman or family with a young child. Evidence based home visiting programs offered in Vermont include Nurse Family Partnership (NFP), Maternal Early Childhood Sustained Home Visiting (MECSH) and Parents as Teachers (PAT).

**EARLY CHILDHOOD AND FAMILY MENTAL HEALTH**
Services for children and their families from birth to age 6 with behavioral health concerns.

**SPECIALIZED CHILD CARE**
Services to help children with high needs experience success in high quality childcare settings.

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**CHILDREN’S INTEGRATED SERVICES**

**SERVICE DELIVERY REFORM**
- A multi-disciplinary team review of all referred families and children
- A primary service coordinator as a single point of contact for families working with multiple service providers
- A One Plan with information on family goals and services provided to facilitate collaboration among providers

**PAYMENT REFORM**
- Payment based on meeting performance measures instead of units of service provided
- A bundled rate for each client served each month, regardless of type or frequency of services
- Claims submitted and reimbursed once per month for each client served instead of one per unit of service

**FINANCING REFORM**
- Regional allocations based on a formula instead of past history
- One fiscal agent responsible for ensuring delivery of all services
- Flexibility to re-allocate funds based on community service needs

**CREATING BEST PRACTICES**
Administered by the Vermont Department for Children and Families, Child Development Division (CDD), CIS is the early childhood component of Integrating Family Services (IFS) - the Agency of Human Services (AHS) approach to transforming how Vermont provides services and resources to help children and families reach their full potential. CIS reaches children early in the life cycle promoting optimal development in a critical growth period and building protective factors in families that mitigate the need for more costly interventions later in life.

Between 2010 and 2016, the CIS model of referral and intake from many sources (no “wrong door”) followed by multi-disciplinary teaming and integrated care coordination has been implemented in every region in Vermont. CIS partner agencies in communities report positive benefits for the children and families they serve. With the reform agenda accomplished, there is a strong shared focus on inter-disciplinary learning and continuous improvement in the delivery of high quality, evidence informed services.