LINKS TO RESOURCES, SERVICES, AND SUPPORTS, INCLUDING VERMONT MENTAL HEALTH SYSTEM

VERMONT STATE-SPECIFIC CURRICULUM



OVERVIEW OF VERMONT-SPECIFIC CURRICULUM

Code of Ethics, including privacy

Links to Resources, services and supports, including Vermont mental health system of care Medicaid/Insurance-Related Requirements, including Collaborative Documentation

Change Facilitation

APPLICABLE CORE COMPETENCY

Number Core Competency

12 Links to resources, services, and supports: Peer support providers journey with others in their efforts to obtain the resources, services and supports they need within mental health and community settings and beyond. Peer support providers share knowledge about available resources, continually develop their knowledge of available resources, and understand when and to whom to reach out for assistance.

LEARNING OBJECTIVES

To develop prospective peer support provider's understanding of the Vermont mental health system and its structure, functions, and processes.

To increase prospective peer support provider's knowledge of resources, services, and supports available within and outside the mental health system.

To equip prospective peer support providers with the skills and strategies to navigate the mental health system and effectively link individuals to appropriate resources.

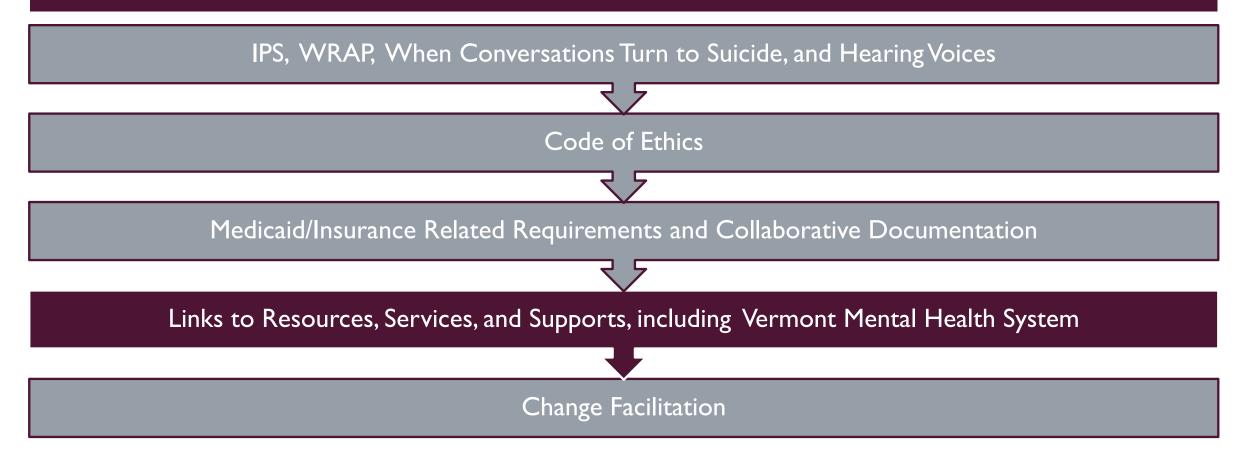
LEARNING OUTCOMES

Prospective peer support providers will demonstrate understanding of the structure, function and processes of the Vermont mental health system of care.

Prospective peer support providers will identify resources, services, and supports available within and outside the Vermont mental health system.

Prospective peer support providers will develop strategies and skills to navigate the Vermont mental health system and community and link individuals to appropriate resources.

SEQUENCE



SCOPE

Most of the time should be spent increasing participants' knowledge of the Vermont mental health system for both children and adults.

- The goal is not to make participants experts in the Vermont mental health system.
- The goal is to familiarize participants to the general structure of the system, what it offers, and how to access the system.

Participants should also be directed to explore 2-1-1.org to understand the programs and services available in Vermont.

Participants will also be provided an e-handbook that describes the Vermont mental health system and links to resources, services and supports.

INSTRUCTIONAL STRATEGIES

Lecture and presentation to introduce and explain the structure, function and processes of the Vermont mental health system for adults and children

Lecture and demonstration of <u>Vermont211.org</u> to introduce and explain how to locate and navigate resources, services and supports

Self-study and practice to develop skills in identifying resources, service, and supports

DIFFERENTIATION AND ADAPTATION

Because of time constraints, opportunities to differentiate and adapt the curriculum for different learning styles will be limited

After grading quiz, determine if individual students might benefit from more individual instruction and support

Allow students to complete self-study assignment in small groups

ASSESSMENTS

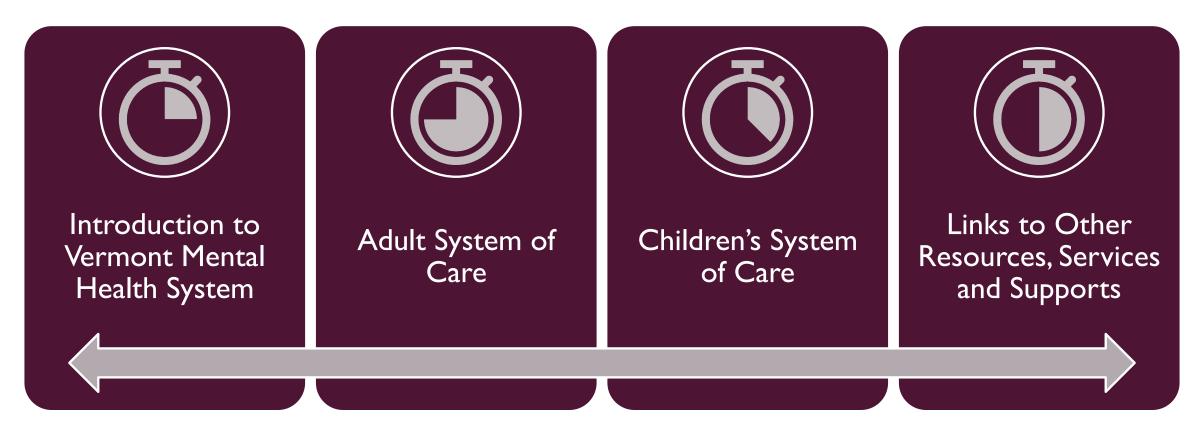
Passing grade on quiz



Demonstrated competence on self-study exercise

• <u>Self-study exercise</u>

TIMEFRAME AND SCHEDULE



MODULE CONTENTS

LINKS TO RESOURCES, SERVICES, AND SUPPORTS, INCLUDING VERMONT MENTAL HEALTH SYSTEM

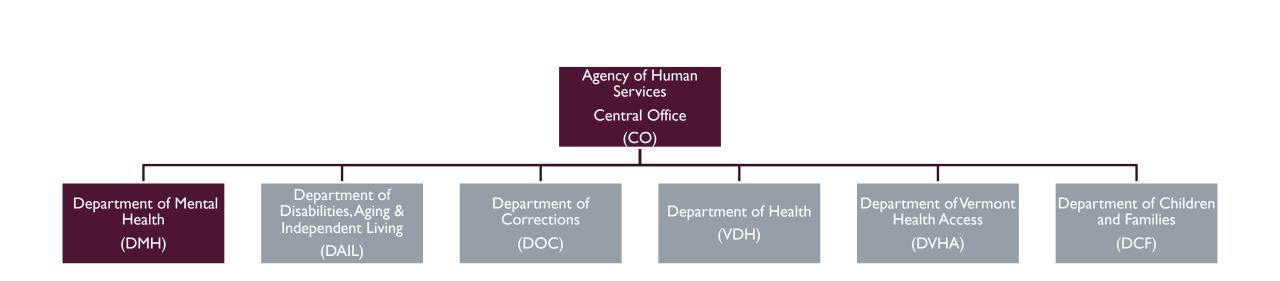


VERMONT DEPARTMENT OF MENTAL HEALTH

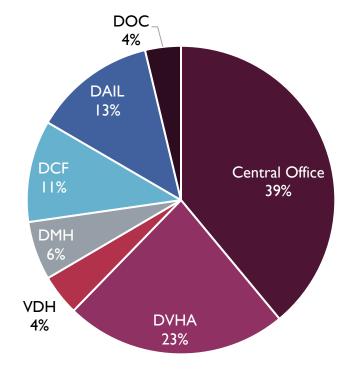
LINKS TO RESOURCES, SERVICES, AND SUPPORTS, INCLUDING VERMONT MENTAL HEALTH SYSTEM

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AGENCY OF HUMAN SERVICES (AHS)

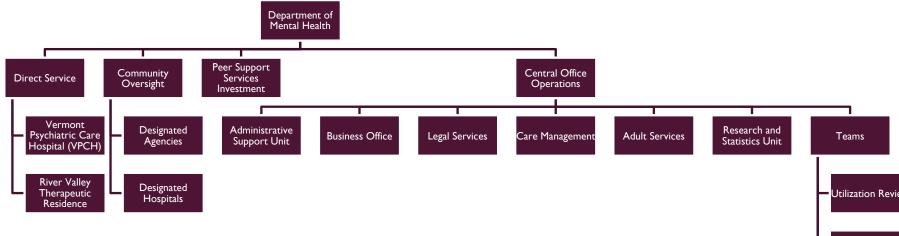


FY 2024 AHS BUDGET, AS PASSED



Total FY24 AHS Budget \$5,045,704,753

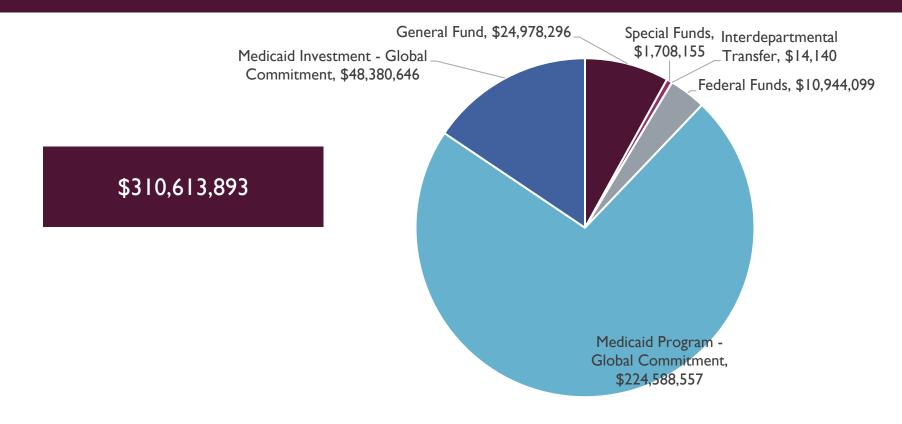
DEPARTMENT OF MENTAL HEALTH OVERVIEW



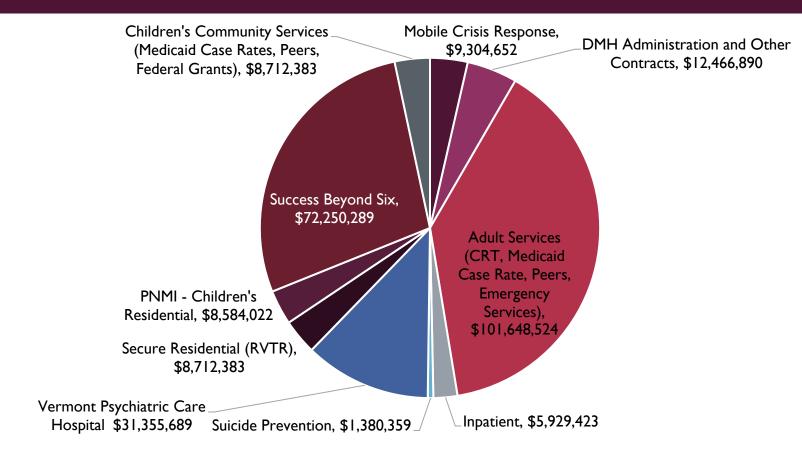
The Department of Mental Health is charged with delivering mental health programs and services to Vermonters and ensuring equal access to appropriate mental health care equivalent to other aspects of health care as part of an integrated, holistic system of care. (18 V.S.A. § 7201)



FY2024 DMH BUDGET SOURCES, AS PASSED



FY24 DMH BUDGET EXPENSES, AS PASSED



VERMONT MENTAL HEALTH SYSTEM OF CARE

LINKS TO RESOURCES, SERVICES, AND SUPPORTS, INCLUDING VERMONT MENTAL HEALTH SYSTEM

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NOTE TO TRAINER

Participants should understand the structure of the Vermont mental health system.

- It is based on levels of care from least restrictive to most restrictive
- By law, individuals must be treated in the least restrictive environment based on their needs

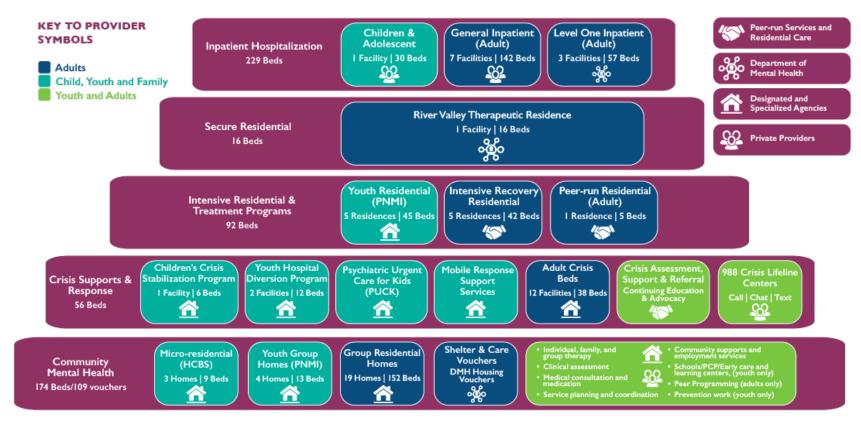
Trainers should ensure that participants see the relationship between the next two slides: Levels of Care and Vermont Mental Health System

- The Vermont Mental Health System slide is organized by levels of care
- The Vermont Mental Health System slide also indicates who provides services: peer run, DMH, designated and specialized agencies, and private providers

LEVELS OF CARE



VERMONT MENTAL HEALTH SYSTEM



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COMMUNITY MENTAL HEALTH

LINKS TO RESOURCES, SERVICES, AND SUPPORTS, INCLUDING VERMONT MENTAL HEALTH SYSTEM

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OVERVIEW OF COMMUNITY MENTAL HEALTH PROVIDERS

Public

- Designated Agencies (DAs)
- Specialized Service Agencies (SSAs)

Private

- Social workers
- Physicians/Psychiatrists
- Psychologists
- Mental health counselors
- Alcohol and drug counselors

Peer-Run

- Another Way Community Center
- Pathways Community Center
- Vermont Psychiatric Survivors
- Alyssum Peer Respite

DESCRIPTION OF PROVIDERS

Designated Agency (DA)

- Private, non-profit organization appointed by DMH in each geographic region of the state to provide mental health programs for adults and children
- Designated agencies also provide substance use, and intellectual and developmental disability services and support
- There are 10 designated agencies in the Vermont

Specialized Service Agency (SSA)

- Private, non-profit organizations appointed by DMH to provide unique programs that offer a distinctive approach to service delivery and coordination or provide services that meet distinctive, individual needs
- May operate in more than one geographic area of state
- There are two specialized service agencies in Vermont

Peer-run organization

• Organizations operated by people with lived experience of trauma, mental health condition, and/or substance use challenge that offer alternatives to the traditional mental health system

SPECIALIZED SERVICE AGENCIES (SSAs)

Northeastern Family Institute

Private, non-profit serving individuals, youth, and their families "coping with the challenges of severe trauma, emotional disturbances and/or intense dysregulation across setting"

- Operates five, trauma-informed community based/day treatment schools in Chittenden County and Northeast Kingdom
- Operates five residential programs throughout Vermont for individuals 10 to 22 years old with mental health and behavioral challenges

Referral is through the Department of Mental Health or the Department for Children and Families

Pathways Vermont

Private, non-profit whose mission is to end homelessness in Vermont and provide innovative mental health alternatives

Pathways Vermont operates Housing First

- Housing First is a homeless assistance approach that prioritizes providing permanent housing to people experiencing homelessness
- Housing First does not require people experiencing homelessness to address all their problems including substance use or mental health problems, or to graduate through a series of services programs before they can access housing.

Referral is through Vermont's system of **Coordinated Entry**

PEER-RUN COMMUNITY MENTAL HEALTH RESOURCES

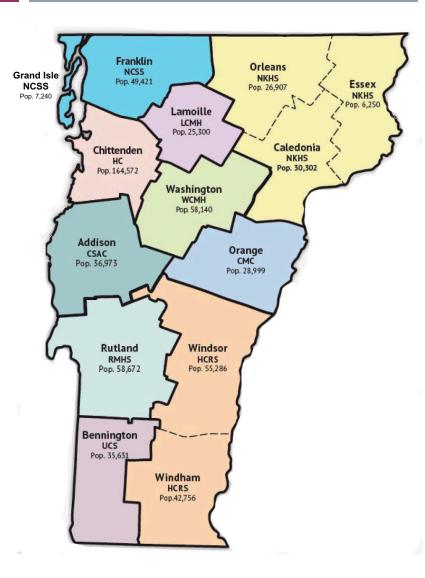
County	Name	Description
Chittenden	Pathways Community Center	Pathways Community Center is a drop-in community center located in Burlington's Old North End.
Rutland	Vermont Psychiatric Survivors (VPS)	<u>VPS</u> offers mutual support, publishes a quarterly newspaper that is distributed throughout Vermont, offers patient representation in Vermont psychiatric hospitals and residential facilities, and sponsors peer-led support groups
Washington	Another Way Community Center	<u>Another Way</u> is a drop-in community center located in Montpelier, VT.
Windsor	Alyssum Peer Respite	Located in Rochester, Vermont, Alyssum is a two-bed peer respite in a home-like setting for adults 18 and up. Alyssum accepts self-referrals. Visit <u>Alyssum</u> for specific eligibility criteria.

DESIGNATED AGENCIES: NOTE TO TRAINER

Designated agencies offer similar services but not identical services. In addition, eligibility for certain services will vary by agency.

Participants should understand that each designated agency operates in a specific region. Most operate in one county. The exceptions are NCSS, NKHS, and HCRS.

COUNTY	DESIGNATED AGENCY (DA)
Addison	Counseling Services of Addison County (CSAC)
Bennington	United Counseling Services (USC)
Caledonia	Northeast Kingdom Human Services (NKHS)
Chittenden	Howard Center (HC)
Essex	Northeast Kingdom Human Services (NKHS)
Franklin	Northwestern Counseling and Support Services, Inc. (NCSS)
Grand Isle	Northwestern Counseling and Support Services, Inc. (NCSS)
Lamoille	Lamoille County Mental Health (LCMH)
Orange	Clara Martin Center (CMC)
Orleans	Northeast Kingdom Health Services (NKHS)
Rutland	Rutland Mental Health Services (RMHS)
Washington	Washington County Mental Health (WCMH)
Windham	Health Care Rehabilitation Services of Southeastern Vermont (HCRS)
Windsor	Health Care Rehabilitation Services of Southeastern Vermont (HCRS)



ADULT COMMUNITY MENTAL HEALTH PROGRAMS VS. SERVICES

Community Mental Health Programs

- Adult Outpatient
- Community Rehabilitation and Treatment (CRT)

Community Mental Health Services

- Clinical assessment
- Service planning and coordination
- Medication and medical consultation
- Individual, family and group therapy
- Community supports
- Employment Services
- Housing and home supports
- Group residential living
- Peer support

COMMUNITY REHABILITATION AND TREATMENT PROGRAM (CRT)

Each designated agency has a CRT program; may also be called "Community Support Program" or CSP

CRT programs serve eligible individuals with diagnoses such as schizophrenia, bipolar disorder, and major depression

CRT programs include an array of services, that may vary by designated agency

Eligibility criteria includes the existence of a qualifying diagnosis, a treatment history indicating a need for more intensive services, and "severe functional impairment"

SERVICES FOR ADULTS, BY PROGRAM

Adult Outpatient Services

- Clinical assessment
- Service planning and coordination
- Community supports
- Individual, family and group therapy
- Medication and medical consultation, and Consultation with Primary Care
- Emergency Care and Crisis Stabilization
- Psychoeducation/Recovery Education

Community Rehabilitation and Treatment Services

- Adult Outpatient Services
- Treatment team of providers, which may include a therapist, case manager, psychiatrist, nurse, and supported employment specialist
- Supported Employment
- Day Recovery/Psychoeducation/Recovery Education
- Housing and Home Supports

ADULT MENTAL HEALTH PROGRAM: NOTE TO TRAINER

The Adult Outpatient Program (AOP) serves adults experiencing mental health challenges. The array of services available for people in the AOP program vary by DA.

The next 10 slides provide more information about what each service entails. The slides are provided should participants have questions about what a particular service available at a designated agency entails.

CLINICAL ASSESSMENT

Evaluation of an individual's goals and mental health concerns

 Includes an evaluation of impact of mental health condition on day-to-day life and strengths and barriers that will impact success with meeting treatment goals

Clinical assessment informs the development of an individualized plan for treatment

SERVICE PLANNING AND COORDINATION

Assistance with accessing and organizing services identified in the individual plan for treatment

Services may include discharge planning and transitions to other programs

Tracking progress towards meeting treatment goals and updating individual plan for treatment accordingly

MEDICAL CONSULTATION AND MEDICATION

Where appropriate, individual consultation with a physician or nurse practitioner about the use of medication

• Includes prescribing, ongoing monitoring of the effects of medication and coordination with primary care providers, as necessary

May also include support with Tobacco Cessation and other substance use treatment

COMMUNITY SUPPORTS AND EMPLOYMENT SERVICES

Services designed to develop or advance skills and social supports that promote mental and physical wellness

Services may include:

- Assistance with improving self-sufficiency in daily living skills
- Supportive counseling
- Support with participating in community activities and communicating with important supports in meeting treatment goals

Services may be provided individually and/or in a group setting

Supported employment is a service that helps people find and maintain meaningful jobs in the community

INDIVIDUAL, FAMILY AND GROUP THERAPY

Individual therapy uses the interaction between a therapist and the person to identify and alleviate distress, helping to develop strategies that promote mental wellness

Family therapy uses the interactions that involve the therapist, an individual and family members to identify and alleviate distress, helping to develop strategies that promote mental wellness

Group therapy uses interactions that involve the therapist, the individual and other individual served in the program to identify and alleviate distress, helping to develop strategies that promote mental wellness

EMERGENCY CARE AND STABILIZATION

Working with individuals to anticipate emergency and crisis situations and support them through such situations

DAY RECOVERY/PSYCHOEDUCATION/RECOVERY EDUCATION

Group recovery activities with other CRT participants to promote wellness, empowerment, sense of community, personal responsibility, self-esteem, and hope

Activities are intended to provide socialization, daily skills development, crisis support, and promotion of self-sufficiency and advocacy

HOUSING AND HOME SUPPORTS

Services designed to help people live successfully in the community

Services may include:

- Outreach services to individuals in their own homes
- Supervised/supported living
- Staffed living residences for one or two people
- Group treatment residences serving three or more people
- Unlicensed home providers (individualized shared-living arrangements offered within a person's home)

GROUP RESIDENTIAL HOMES

Living arrangements for three or more people, owned and/or staffed full-time by employees of a provider agency

• Intended to provide individualized, recovery-oriented treatment plan services in either transitional or longer-term residential rehabilitation settings

Group homes are licensed as residential treatment programs

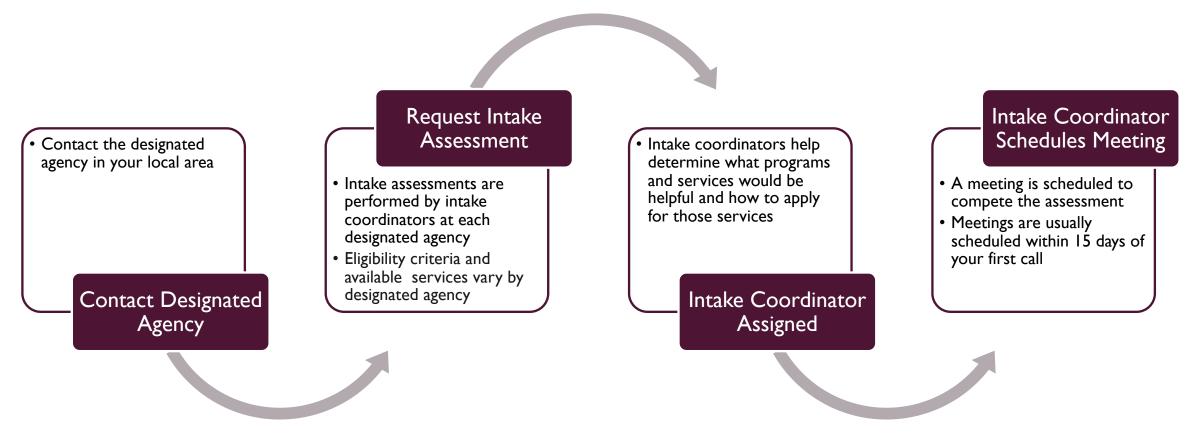
• Residents are afforded resident rights and protections before transitioning to more independent living arrangements as outlined in their treatment plans

SHELTER & CARE VOUCHERS

DMH administers housing programs for Vermonters with mental health diagnoses who are at risk for or experiencing homelessness

- Housing voucher program (Housing Subsidy & Care)
- Rental assistance
- PATH, a federally funded program to provide outreach and engagement of homeless individuals with diagnoses of schizophrenia, bipolar disorder, and major depression

ACCESS TO COMMUNITY MENTAL HEALTH RESOURCES



CRISIS SUPPORTS & RESPONSE

LINKS TO RESOURCES, SERVICES, AND SUPPORTS, INCLUDING VERMONT MENTAL HEALTH SYSTEM

OVERVIEW OF CRISIS SERVICES

Crisis services are time-limited, intensive supports provided for individuals and families who are currently experiencing or may be expected to experience a psychological, behavior, or emotional crisis.

Crisis services are available 24 hours a day, seven days a week.

TYPES OF CRISIS SUPPORTS & RESPONSE

Crisis Assessment, Support & Referral

Mobile response support services

Adult Crisis Beds

988 Crisis Lifeline Centers Call |Chat| Text

Peer-Run

• Alyssum Peer Respite

 Pathways Support Line

CRISIS ASSESSMENT, SUPPORT & REFERRAL

Crisis assessment, support and referral includes initial information gathering, triage, training and early intervention, supportive counseling, consultation, referral, and crisis planning

Supports may include:

- Outreach and stabilization
- Clinical Diagnosis and Evaluation
- Treatment and Direct Support
- Integration/Discharge Planning to provide services in the person's home or an alternative setting.

Assessment may also include screening for inpatient psychiatric admission.

DESIGNATED AGENCY CRISIS CONTACTS

Crisis services can be accessed through the designated agency in the individual's region

List of Contact Names and Numbers

MOBILE RESPONSE SUPPORT SERVICES

Service will be available statewide, serve individuals of all ages experiencing a mental health or substance use crisis

• Service will be 24/7/365

Services will be delivered by a multi-disciplinary team comprised of a mental health professional and a certified peer support provider

• Mobile services must respond to individuals in a community setting

ADULT CRISIS BEDS

Adult crisis beds offer emergency, short-term mental health supports around the clock in a setting other than the person's home

There are adult crisis beds in every county except Essex, Orleans, Grand Isle, and Windham

Referrals to adult crisis beds are typically through the designated agencies

988 CRISIS LIFELINE CENTERS

9-8-8 is the Suicide and Crisis Lifeline for anyone experiencing mental health related distress

• People can call or text 9-8-8 or chat 988lifeline.org

9-8-8 offers 24/7 access to trained crisis counselors

• System is designed to provide resources for individuals experiencing mental health challenges

Counselors may involve law enforcement if they perceive an individual is at risk of death

PEER-RUN CRISIS SUPPORT

Alyssum Peer Respite

Two-bed respite in a home-like setting in Rochester, Vermont, staffed by individuals with lived experience of trauma, mental health and/or substance use challenges

Serves adults (18 years old and up) on a voluntary basis, only

• No medical staff on the premises

Guests must meet intake criteria

• Guests come from nearly every Vermont county

Pathways Support Line

Available 24/7 for Vermonters at least 18 years old

• Staffed by folks with lived experience of trauma, mental health, substance use challenges

Call or text

• (833) VT-TALKS or 833-888-2557

INTENSIVE RESIDENTIAL & TREATMENT PROGRAMS

LINKS TO RESOURCES, SERVICES, AND SUPPORTS, INCLUDING VERMONT MENTAL HEALTH SYSTEM

OVERVIEW OF INTENSIVE RESIDENTIAL RECOVERY PROGRAMS

Intensive Residential Recovery (IRR) programs offer an array of therapeutic and recovery-oriented services within a residential setting

All IRR programs are "staff secure," meaning on-site staffing is available to provide oversight

IRR programs are short-term/transitional

• Assistance with establishing more permanent housing, or housing in a less intensive residential program, is included in all resident's program plans

INTENSIVE RECOVERY RESIDENTIAL PROGRAMS

COUNTY	PROGRAM	CONTACT
Chittenden	Second Spring North Westford	(802) 899-1328
Windham	Meadowview Recovery Residence Brattleboro	Meadowview Program Director (802) 275-4971
Windham	Hilltop Recovery Residence Westminster	Residential Services Program Director (802) 732-8343
Orange	Second Spring South Williamstown	(802) 231-4016

PEER-RUN INTENSIVE RECOVERY RESIDENTIAL PROGRAM

Soteria House is a 5-bed, Therapeutic Community Residence for the prevention of hospitalization for individuals experiencing a distressing extreme state, commonly referred to as psychosis.

- Operated by Pathways Vermont
- Located in Burlington (Chittenden County)

Soteria House offers an alternative approach to the experience of psychosis by providing person-centered adaptive care. Soteria has on-site psychiatry, but treats psychiatric medication as a personal choice and offers alternative modalities, including dream-work, breathwork, herbalism, and meditation.

Apply <u>online</u> or by telephone at (888) 492-8218 ext 140

SECURE RESIDENTIAL

LINKS TO RESOURCES, SERVICES, AND SUPPORTS, INCLUDING VERMONT MENTAL HEALTH SYSTEM

RIVER VALLEY THERAPEUTIC RESIDENCE (RVTR)

River Valley Therapeutic Residence is a 16-bed, locked residential facility located in Essex

RVTR serves adults transitioning from a Level 1 psychiatric hospital setting or from the Department of Corrections

• RVTR supports individuals who are not deemed ready for discharge into the community but who are no longer considered in need of acute inpatient psychiatric care

INPATIENT HOSPITALIZATION

LINKS TO RESOURCES, SERVICES, AND SUPPORTS, INCLUDING VERMONT MENTAL HEALTH SYSTEM

PURPOSE OF INPATIENT HOSPITALIZATION

Inpatient psychiatric hospitalization is to provide stabilization for individuals experiencing an acute psychiatric crisis

Inpatient hospitalization is only appropriate if no other lower level of care would be safe or appropriate to meet individual's needs

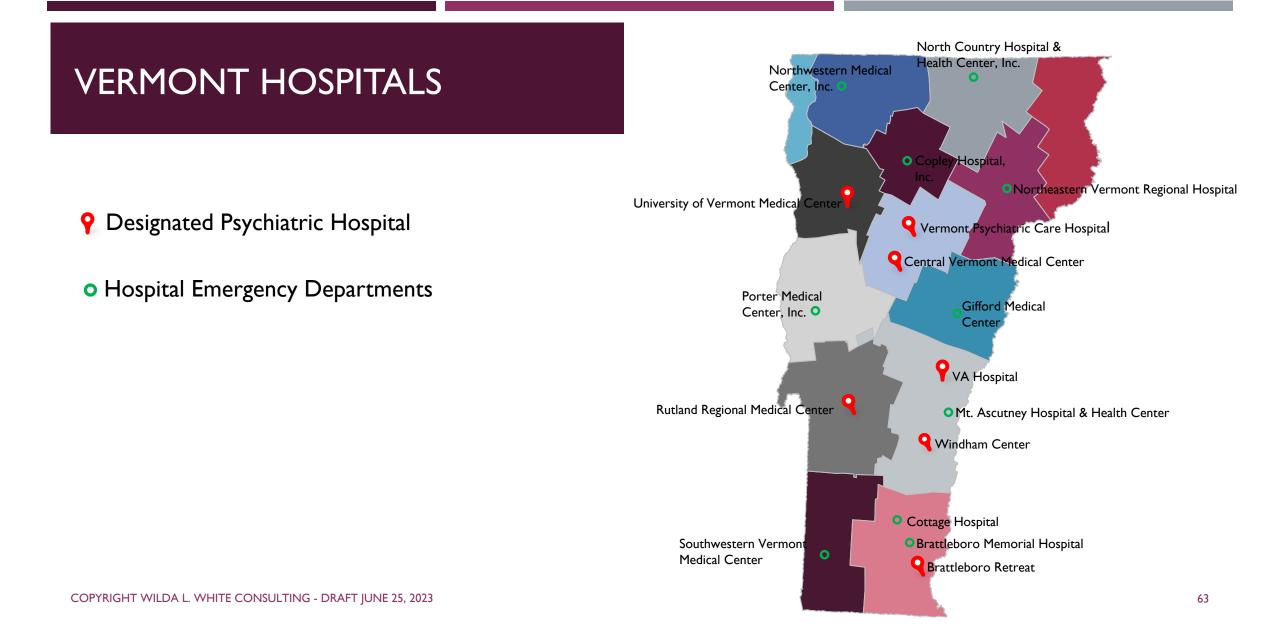
• Accreditation by CMS and The Joint Commission as well as the law all require that individuals be served in the least restrictive level of care at all times

Focus of inpatient psychiatric hospitalization is medication management, connecting individuals with services, and developing adequate discharge plans

ACCESS TO INPATIENT HOSPITALIZATION

Most voluntary patients are admitted from hospital emergency departments or through designated agencies

Involuntary patients are admitted based on a court order or legal process



PSYCHIATRIC HOSPITALS

	Level I	Adults	Children	Voluntary	Involuntary	Veterans Only
Brattleboro Retreat	X	X	x	x	X	
CVMC		X		X	X	
RRMC	X	X		X	X	
UVMMC		X		X	X	
VA Hospital				X	X	X
VPCH		X			X	
Windham Center		X		×	×	

PROGRAMS IN PROGRESS

LINKS TO RESOURCES, SERVICES, AND SUPPORTS, INCLUDING VERMONT MENTAL HEALTH SYSTEM

ADULT PROGRAMS/SERVICES IN THE PIPELINE

Community Mental Health	Crisis Supports & Response	Intensive Residential & Treatment Programs	Secure Residential	Inpatient Hospitalization
• None	 Mobile Crisis Response Living Room Model programs Northeast Kingdom Urgent Care Center 	• None	• None	• None

CHILDREN'S MENTAL HEALTH SYSTEM OF CARE

LINKS TO RESOURCES, SERVICES, AND SUPPORTS, INCLUDING VERMONT MENTAL HEALTH SYSTEM

ABOUT VERMONT CHILDREN'S MENTAL HEALTH SYSTEM

Serves children 0 to 22 years of age

All Designated Agencies and the Specialized Service Agency, NFI, provide mental health services to children

Services may span several agencies and departments, including DMH, DCF, AOE, DAIL, VDH, and DVHA

VERMONT MENTAL HEALTH SYSTEM



CHILDREN MENTAL HEALTH SYSTEM OF CARE

Community Mental Health	Crisis Supports & Response	Intensive Residential & Treatment Programs	Secure Residential	Inpatient Hospitalization
 Micro-residential (HCBS) Youth Group Homes (PNMI) Schools/PCP/Early care and learning centers Prevention work 	 Children's Crisis Stabilization Program Youth Hospital Diversion Program Psychiatric Urgent Care for Kids (PUCK) Mobile Response Support Services 	• Youth Residential (PNMI)	• None	• Brattleboro Retreat

VERMONT PUBLIC MENTAL HEALTH SERVICE ARRAY FOR CHILDREN, YOUTH & FAMILIES

Clinical assessment, therapies and psychiatric services Specialized Rehabilitation •Service planning and coordination •Community supports •Skill development Crisis services and supports Respite Intensive Home & Community Based Services (HCBS) aka Wraparound School-based mental health Supported Employment (JOBS: Jump on Board for Success) Crisis stabilization and inpatient programs Out-of-home treatment (therapeutic foster care, residential assessment/treatment)

ACCESS TO CHILDREN'S RESIDENTIAL AND CRISIS BEDS

	Screeners	DA	DMH	DAIL	DCF	SSA
 Crisis/Hospital Diversion Crisis stabilization for 7 – 10 days Jarrett House (HC) [ages 6 – 12] NFI HDP [ages 11 – 17] 	X					
 Psychiatric Urgent Care for Kids (PUCK) HCRS (Brattleboro) UCS (Bennington) LCMH (Morrisville) 	X					
Residential Programs		Х	Х	Х	Х	
Micro-residential Programs		X	Х		X	
Therapeutic Foster Care COPYRIGHT WILDA L. WHITE CONSULTING - DRAFT JUNE 25, 2023		Х			Х	X 72

COORDINATED SERVICES PLAN (CSP)

A Coordinated Services Plan is a written plan developed by a team for a child/youth who requires services from more than one agency.

- The CSP process entitles families to the coordination of services.
- CSP does not guarantee entitlement to specific services.
- Approval for specific services and/or placements is the responsibility of the involved agency or agencies.

Team includes representatives of education, the appropriate departments of the Agency of Human Services, the parents or guardians, and natural supports connected to the family.

The Coordinated Services plan includes the Individual Education Plans (IEP) as well as human services treatment plans or individual plans of support and is intended to be organized to ensure that all components are working towards compatible goals, progress is monitored, and resources are used effectively.

ELIGIBILITY FOR COORDINATION OF SERVICES

Children and adolescents aged 0 to 22 who:

- meet the definition of "serious emotional disturbance" in Act 264 and/or
- are eligible for special education and are eligible to receive disability-related services covered by at least one AHS department

"SERIOUS EMOTIONAL DISTURBANCE" MEANS A CHILD OR ADOLESCENT WHO:

Exhibits a behavioral, emotional, or social impairment that disrupts his or her academic or developmental progress or family or interpersonal relationships

Has impaired functioning that has continued for at least one year or has an impairment of short duration and high severity

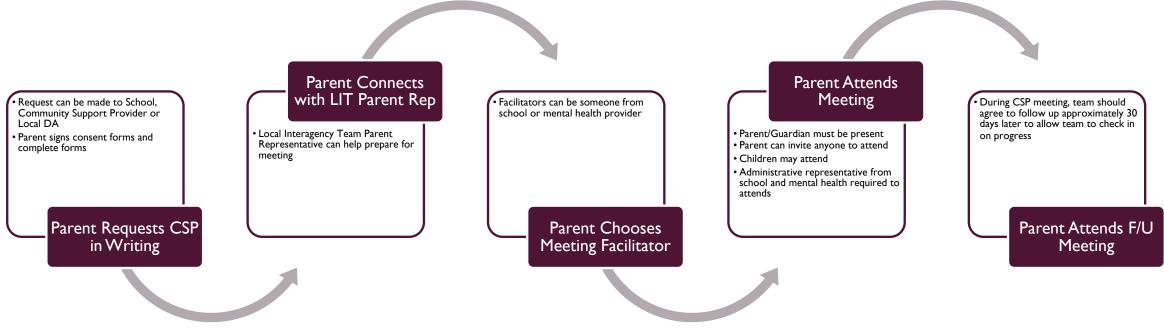
Is under 18 years of age, or is under 22 years of age and eligible for special education under state or federal law; and

Falls into one or more of the following categories, whether or not he or she is diagnosed with other serious disorders such as mental retardation, severe neurological dysfunction or sensory impairments

- exhibits seriously impaired contact with reality and severely impaired social, academic and self-care functioning whose thinking is
 frequently confused, whose behavior may be grossly inappropriate and bizarre and whose emotional reactions are frequently
 inappropriate to the situation.
- classified as management or conduct disordered because they manifest long-term behavior problems including developmentally inappropriate inattention, hyperactivity, impulsiveness, aggressiveness, anti-social acts, refusal to accept limits, suicidal behavior or substance abuse.
- suffer serious discomfort from anxiety, depression, irrational fears and concerns whose symptoms may be exhibited as serious
 eating and sleeping disturbances, extreme sadness of suicidal proportion, maladaptive dependence on parents, persistent refusal to
 attend school or avoidance of non-familial social contact.

INITIATING COORDINATED SERVICES PLAN (CSP) MEETING

CSP helpful for unresolved complex issues or for additional support to address unmet needs.



GRIEVANCES AND APPEALS

LINKS TO RESOURCES, SERVICES, AND SUPPORTS, INCLUDING VERMONT MENTAL HEALTH SYSTEM

GRIEVANCES AND APPEALS

Individuals receiving services at designated agencies and hospitals may file grievances if dissatisfied or appeals if they disagree with proposed changes to type or amount of services offered as part of their treatment plan

Possible subjects for grievances include, but are not limited to:

- quality of care or services provided
- aspects of interpersonal relationships such as rudeness of a provider or employee
- failure to respect the individual's rights

Grievances may be expressed orally or in writing at any time

DA/SSA Grievance or Appeal Form

RIGHTS OF PERSONS IN CUSTODY OF DMH

Persons in the custody or temporary custody of the DMH Commissioner have certain rights

 <u>Notice of Rights as a Person in the Custody or Temporary Custody of the Commissioner of Mental</u> <u>Health</u>

Persons in custody of DMH Commissioner may file a grievance about a hospital if they are dissatisfied with their treatment or feel their rights have been violated

- Grievances about mental health care are filed with the hospital, DMH, or VDH, Board of Medical Practice
- Grievances about abuse, neglect or exploitation are filed with DAIL, Adult Protective Services

OTHER RESOURCES, SERVICES AND SUPPORTS

LINKS TO RESOURCES, SERVICES, AND SUPPORTS, INCLUDING VERMONT MENTAL HEALTH SYSTEM

VERMONT211.ORG - INFORMATION AND REFERRAL



Dial 2-1-1

Email info@vermont211.org

Text Zip Code to 898211



VERMONT211.ORG - INFORMATION AND REFERRAL: NOTE TO TRAINER

Trainers should direct participants to become familiar with resources available in Vermont by perusing vermont211.org.

• Peer support providers can also refer peer support recipients to the site.

Trainers may click on the preceding slide's icons to demonstrate how Vermont211.org works.

• Vermont211.org also provides personalized services via telephone, text, email.

E-BOOKLET

LINKS TO RESOURCES, SERVICES, AND SUPPORTS, INCLUDING VERMONT MENTAL HEALTH SYSTEM

OVERVIEW OF E-BOOK FOR CERTIFIED PEER SUPPORT PROVIDERS

Participants will be provided an e-Book that they can reference for additional information about the Vermont Mental Health System and Links to Resources

Click on the cover page to the right to see the draft e-Book's Table of Contents

Welless Collaboration and the second second

A GUIDE FOR CERTIFIED PEER SUPPORT PROVIDERS

Vilda L. White /ILda L white Consulting | PO BOX 502 - DORSET VT 05251

RESOURCES AND MATERIALS

LINKS TO RESOURCES, SERVICES, AND SUPPORTS, INCLUDING VERMONT MENTAL HEALTH SYSTEM

RESOURCES AND MATERIALS

- <u>Act 264 Coordinated Services Plan (CSP)</u> Agency of Human Services & Agency of Education, Revised January 2022
- Mental Health System Care, Online Training, Vermont Department of Mental Health, August 2, 2023
- <u>Vermont's System of Care for Children, Youth & Families</u>, Laurel Omland MS, NCC, Director, Child, Adolescent & Family Unit, Vermont Department of Mental Health, February 2023
- <u>Counterpoint</u> newspaper Resources Directory (back page)

ACRONYMS

Acronym/Abbreviation	Long Form
AOE	Agency of Education
AOP	Adult Outpatient Program
CMC	Clara Martin Center
CMS	Center for Medicare and Medicaid Services
CRT	Community Rehabilitation and Treatment
CSAC	Counseling Services of Addison County
CSP	Coordinated Services Plan or Community Support Program
CVMC	Central Vermont Medical Center
DA	Designated Agency
DAIL	Department of Disabilities, Aging & Independent Living

ACRONYMS (CONT'D)

Acronym/Abbreviation	Long Form
DCF	Department of Children and Families
DMH	Department of Mental Health
DOC	Department of Corrections
DVHA	Department of Vermont Health Access
НС	Howard Center
HCBS	Home- and Community-Based- Services
HCRS	Health Care Rehabilitation Services of Southeastern Vermont
IRR	Intensive Recovery Residence
LCMH	Lamoille County Mental Health

ACRONYMS (CONT'D)

Acronym/Abbreviation	Long Form
NCSS	Northwestern Counseling and Support Services, Inc.
NKHS	Northeast Kingdom Human Services
PATH	Projects for Assistance in Transition from Homelessness
PCP	Primary Care Provider
PNMI	Private Nonmedical Institutions (PNMI) for Residential Child Care
PUCK	Psychiatric Urgent Care for Kids
RMHS	Rutland Mental Health Services
RRMC	Rutland Regional Medical Center
RVTR	River Valley Therapeutic Residence

ACRONYMS (CONT'D)

Acronym/Abbreviation	Long Form
SSA	Specialized Service Agency
USC	United Counseling Services
UVMMC	University of Vermont Medical Center
VA	Veterans Administration
VDH	Vermont Department of Health
VPCH	Vermont Psychiatric Care Hospital
VPS	Vermont Psychiatric Survivors
V.S.A.	Vermont Statutes Annotated
WCMH	Washington County Mental Health

GLOSSARY

Definition Term Act 264 Act 264 is a law passed in 1988 by the Vermont General Assembly. Act 264 required that human services and public education work together, involve parents and coordinate services for better outcomes for children and families. The Act developed a coordinated system of care so that children and youth with a disability receive appropriate educational, mental health, child welfare, juvenile justice, residential, and other treatment services in accordance with an individual plan. In 2008, the Agency of Human Services, launched an initiative called Integrating Family Services, which consolidated more than 30 state and federal funding streams into one unified case rate with the goal of integrating services for children and their families around providing services, support and treatment earlier to prevent more intense needs, to achieve better outcomes and spend money more efficiently.

GLOSSARY (CONT'D)

Term	Definition
Coordinated Entry	Coordinated Entry (CE) is a process intended to ensure people experiencing a housing crisis have fair and equal access and are quickly identified, assessed for, referred and connected to housing assistance based on their strengths and needs. The goal is to quickly access the needs of individuals and families, and effectively match each individual or family with the most appropriate resources available to address that individual or family's particular needs.
Home- and Community-Based- Services	Home- and Community-Based- Services (HCBS) provide opportunities for Medicaid beneficiaries to receive services in their own home or community rather than institutions or other isolated settings. HCBS typically serves people with intellectual or developmental disabilities, physical disabilities, and/or mental illnesses.
Level I	Level I is a term unique to Vermont that refers to intensive mental health services for which the State of Vermont reimburses participating hospitals at a higher rate.

GLOSSARY (CONT'D)

Term	Definition
PNMI	The State of Vermont funds a network of treatment facilities for children and adolescents with emotional, behavioral and other challenges through Private Nonmedical Institutions (PNMI) for Residential Child Care, part of the State's Medicaid program. The facilities provide treatment for children and adolescents and families which is designed to build on their strengths and return children to their homes and communities whenever possible and appropriate.

GLOSSARY (CONT'D)

Term	Definition
Success Beyond Six	Success Beyond Six is the name of the program that provides medically necessary community mental health services to eligible children and youth with assessed need in schools based on a contract between the school and the Designated Agency. Not all school mental health services are provided by Designated Agencies. However, Designated Agencies are the only entity qualified in Vermont under Medicaid to provide expanded mental health supports beyond traditional clinical therapies.
	Success Beyond Six has three main components: School-based Clinical Services; School- based Behavioral Services; and Concurrent Education Rehabilitation and Treatment.
	Success Beyond Six uses local education funds as the State of Vermont's matching dollars to draw down federal Medicaid eligible services to eligible children and youth.