

Vermont Department of Mental Health

MELISSA BAILEY, COMMISSIONER

Departmental Overview

CENTRAL OFFICE ORGANIZATION

PROVIDER AGENCIES

DEPARTMENTAL PROGRAMS

BUDGET SNAPSHOT

DATA –EMERGENCY DEPARTMENTS, INPATIENT USE AND
OTHER DATA POINTS

Central Office Organization

Overall Operations supported by ~65 positions

Administrative Support Unit

Financial Services Unit

Legal Services Unit

Research & Statistics Unit

Clinical Care Management Unit

Operations, Policy, & Planning Unit

Quality Management Unit

Children, Adolescent and Family Unit (CAFU)

Adult Mental Health Services Unit

Vermont Psychiatric Care Hospital and Middlesex Secure Residential

VPCH – 25 bed capacity

Middlesex – 7 bed capacity

About 206 classified positions between the two facilities with additional contracted positions for medical services and traveling nurses to operate 24/7 facilities with 3 shifts.

Designated Providers

Designated Agencies

- Clara Martin Center
- Counseling Services of Addison County
- Health Care and Rehabilitation Services of Southeastern Vermont
- Howard Center
- Lamoille County Mental Health Services
- Northwest Counseling and Support Services
- Northeast Kingdom Human Services
- Rutland Mental Health Services
- United Counseling Service
- Washington County Mental Health Services

Specialized Services Agencies

- Pathways Vermont
- Northeastern Family Institute

Designated Hospitals

- Brattleboro Retreat
- Central Vermont Medical Center
- Rutland Regional Medical Center
- University of Vermont Medical Center
- Windham Center
- Vermont Psychiatric Care Hospital (State-run)
- White River Junction VA Medical Center

State Secure Residential

- Middlesex Therapeutic Community Residence

Provider Capacity for Inpatient, Crisis and Residential Beds

Designated Agencies

- Adult Crisis Beds: 38 beds
- Youth Crisis Beds: 12 beds
- Adult Intensive Residential: 42 beds

Designated Hospitals

- Adult – Level 1 involuntary: 45 beds*
- Adult – Non-Level 1 (involuntary and voluntary): 154 beds
- Children and Youth: 28 beds

Peer Service Agencies

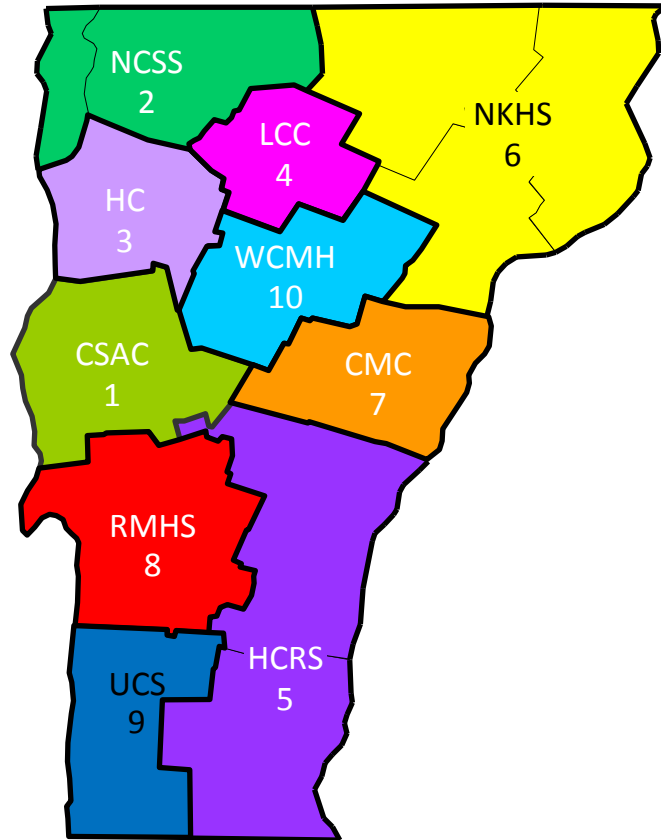
- Adult Crisis Beds: 2 beds
- Adult Intensive Residential: 5 beds

State Secure Residential

- Middlesex Therapeutic Community Residence: 7 beds*

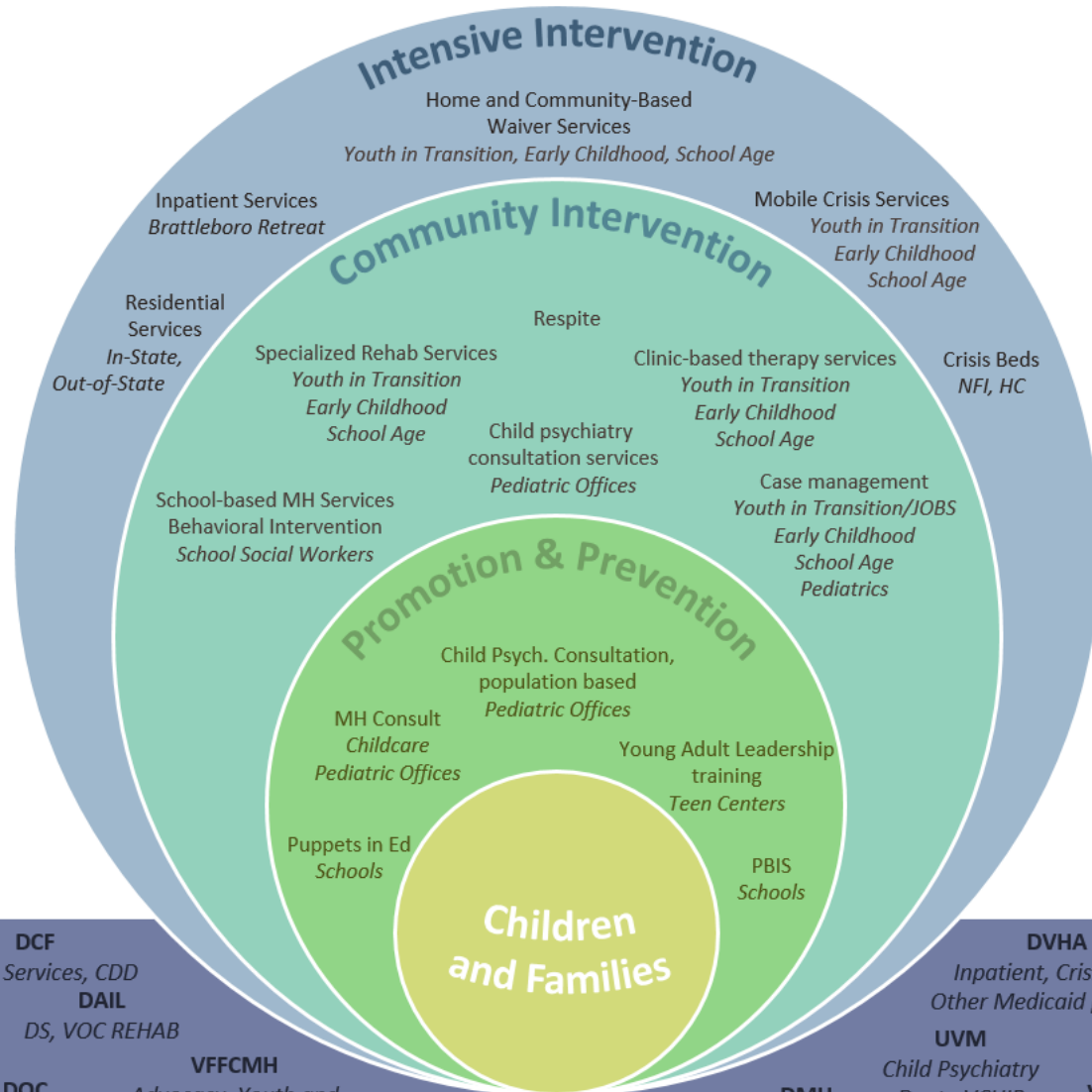
*45 level 1 plus 7 secure residential = 52 beds
replacing the 54 VSH beds

Designated Providers



- CMC** Clara Martin Center
- CSAC** Counseling Services of Addison County
- HCRS** Health Care and Rehabilitation Services of Southeastern VT
- HC** Howard Center
- LCMH** Lamoille County Mental Health Services
- NCSS** Northwest Counseling and Support Services
- NKHS** Northeast Kingdom Human Services
- RMHS** Rutland Mental Health Services
- UCS** United Counseling Service
- WCMH** Washington County Mental Health Services
- NFI** Northeastern Family Services (SSA)
- PV** Pathways Vermont (SSA)

Children's Mental Health System of Care



Acronyms

Providers
DA – Designated Agency
DH – Designated Hospital
HC – HowardCenter
NFI – Northeastern Family Institute
SSA – Specialized Service Agency

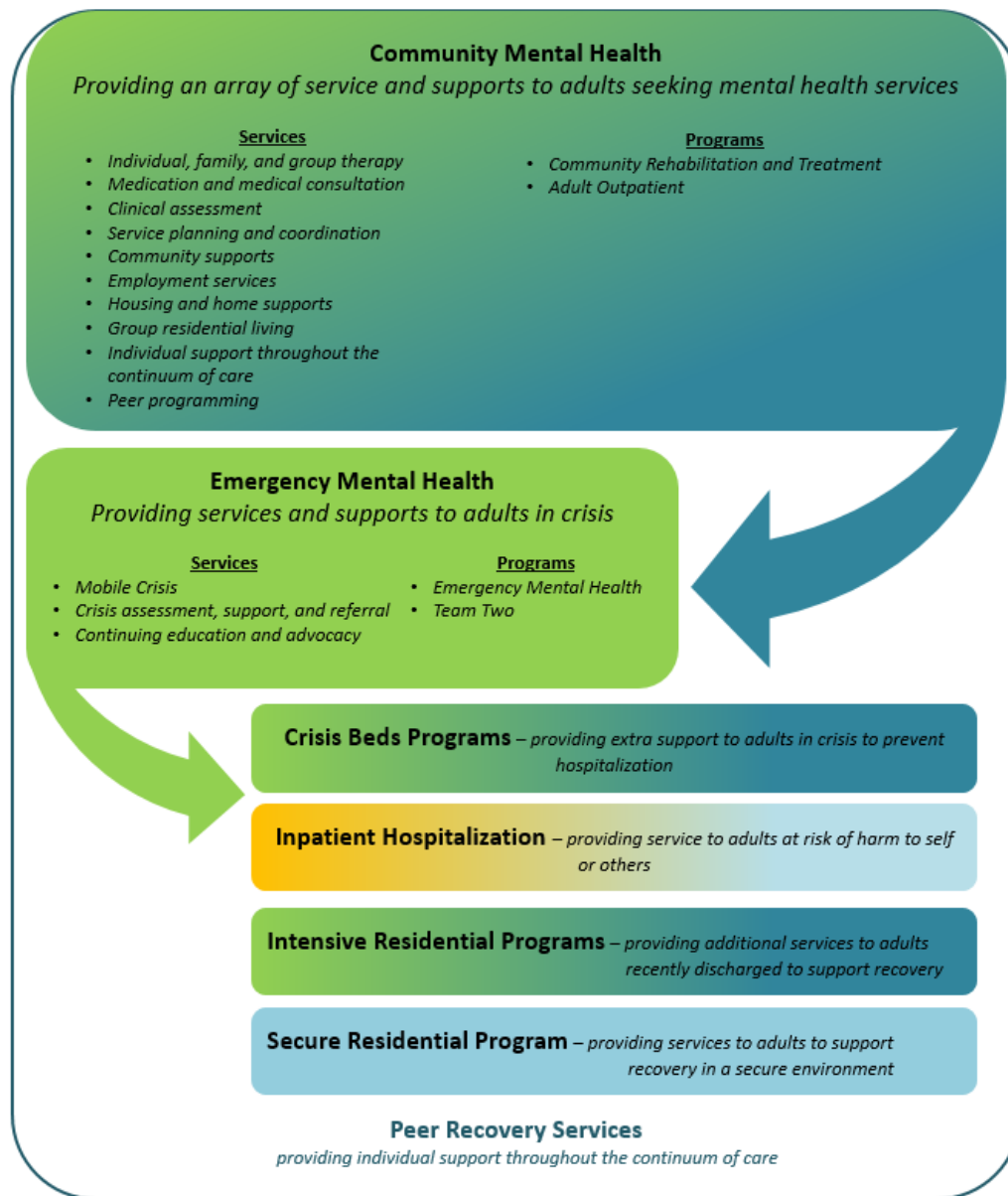
State Government
AOE – Agency of Education
DAIL – Dept. of Disabilities, Aging, and Independent Living
DCF – Dept. for Children and Families
DMH – Dept. of Mental Health
DOC – Dept. of Corrections
VDH – Dept. of Health
ADAP – Alcohol Drug Abuse Programs at VDH
EPI – Epidemiology at DMH/VDH
MCH – Maternal Child Health at VDH

Partners and Programs
PBIS – Positive Behavioral Intervention and Supports
UVM – University of Vermont
VCHIP – Vermont Child Improvement Project
VFFCMH – Vermont Federation of Families for Children's Mental Health

Supported By

DCF Family Services, CDD	DVHA Inpatient, Crisis Beds Other Medicaid providers
AOE LEAs	UVM Child Psychiatry Dept., VCHIP
DAIL DS, VOC REHAB	VDH ADAP, EPI, MCH
DOC Services for YIT	DMH 10 DAs, 1 SSA, 1 DH
VFFCMH Advocacy, Youth and Family Voice	

Department of Mental Health Adult Mental Health System of Care



Color Legend

Department of
Mental Health (DMH)

Designated Agencies

private, non-profit service providers that are responsible for ensuring needed services are available through program delivery, local planning, service coordination, and monitoring outcomes within their geographic region.

Specialized Services Agencies

private, non-profit service providers that provide a distinctive approach to service delivery and coordination or provide services that meet distinctive individual needs.

Private Providers

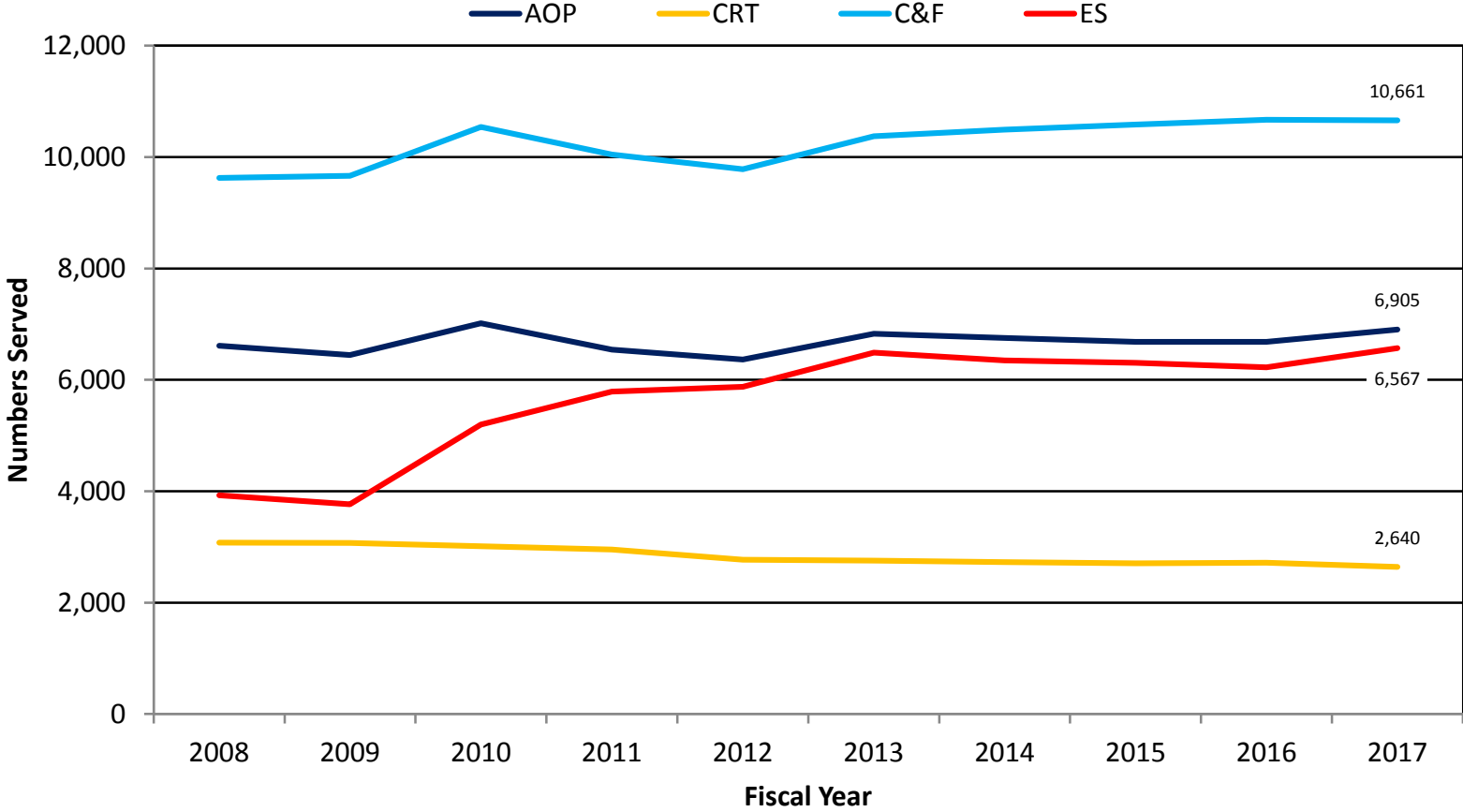
Psychiatrists, Psychologist, Nurse Practitioners, Social Workers, Physician Assistants, Licensed Mental Health Clinicians, Community Hospitals

Community Programs

Program	Description
Adult Outpatient (AOP)	Provides services for adults who do not have prolonged serious disabilities but who are experiencing emotional, behavioral, or adjustment problems severe enough to warrant professional attention
Community Rehabilitation and Treatment (CRT)*	Provides services for adults with severe and persistent mental illness
Children and Families (C&F)*	Provide services to children and families who are undergoing emotional or psychological distress or are having problems adjusting to changing life situations.
Emergency Services	Serves individuals who are experiencing an acute mental health crisis. These services are provided on a 24-hour a day, 7-day-per-week basis with both telephone and face-to-face services available as needed.
Advocacy and Peer Services	Broad array of support services provided by trained peers (a person who has experienced a mental health condition or psychiatric disability) or peer-managed organizations focused on helping individuals with mental health and other co-occurring conditions to support recovery

**mandated service population*

People Served by Program



Review of Key Data Points – Act 82

- Trend line of number of persons presenting with psychiatric complaints at ED (Q/A1)
- How this trend compares with ED utilization in general (Q/A2)
- Breakdown of people admitted voluntarily, involuntarily and court – ordered (Q/A3)
- Geographic differences (Q/A5)
- Average number waiting in EDs involuntarily and wait times (Q/A6)
- Length of stays adults and children as well as civil vs. forensics (Q/Q9)
- Changes in rate of rehospitalization (Q/A11)
- Changes in number of beds over time Pre-Irene to today (Q/A14)

Thank You!

Questions and discussion