

COMMISSIONER'S MESSAGE

As Governor-elect Scott and his Administration take office in January, new leadership for both AHS and DMH will be put in place to lead the delivery of high quality mental health services. Department staff, providers, and the mental health community at large all have made significant contributions to what services are today, and have been instrumental in developing the public mental health system through your work and dedication to the people we serve. It has been a privilege to be part of the leadership of this Department as well as its Commissioner most recently. You all are deserving of recognition and my thanks for all you have done and continue to do. You do so out of a strong commitment to people and a desire to help them move forward in their recovery and realize opportunities that will improve their life course. Keep the focus on this essential and valuable work each day.

I am pleased to announce that effective January 6th, I will be joining the Department of Mental Health as Director of Operations, Planning, and Development. The new position will work in collaboration with the Director of Mental Health Services and new department leadership when identified. Both directors will support the other when absent in providing overall continuity for the department, staff, and programs. In my new role, I will oversee day-to-day operations of DMH and assist in budget development, contract and grant development and interdepartmental collaboration initiatives, and outcomes oversight and programmatic accountability of community-based services and programs. The Director of Mental Health Services, Mourning Fox, will continue to provide overall clinical oversight for adult and children's program directors, training and technical assistance to service providers, care management and utilization review, and interdepartmental clinical collaborations. I look forward to continuing the department's work on behalf of the mental health services system and the opportunity to work with the dedicated group of individuals employed by DMH.

I wish everyone a happy holiday season and new year. I hope you, your families, and those closest to you enjoy as much time together as possible.

Thank you and best wishes.

~ Frank Reed, Commissioner

FACILITIES

- **Secure Residential Facility**

The Department of Mental Health issued a Request for Proposals (RFP) from interested parties for the development and operation of staff-secure and facility-secure (locked) residential recovery (SRR) programming. The intent is replacement of the temporary SRR psychiatric facility owned and operated by the State in the Town of Middlesex off I-89 Exit 9. A new, permanent SRR may serve additional populations in need of a therapeutic, secure residential treatment setting. Proposals are due January 25, 2017. To read the background regarding this project, go to:

<http://mentalhealth.vermont.gov/news/request-proposals-siting-and-design-psychiatric-secure-residential-recovery-programs>

VERMONT PSYCHIATRIC CARE HOSPITAL

- **Meet Dr. Alisson Richards, Medical Director**

The Advisory had an opportunity to interview the Vermont Psychiatric Care Hospital's new Medical Director, Alisson Richards, M.D. This leadership role involves clinical, administrative, legal, policy and program responsibilities. It presents an opportunity to build a philosophy of care, to lead change, and to find ways to use the environment of care to help people who are struggling. Dr. Richards became Medical Director on August 1, 2016, two years after VPCH opened on July 2, 2014, operating with one unit and "new" everything. It took only one year for the hospital to become *fully operational* – the term used by the Green Mountain Care Board to relieve a health care facility from Certificate of Need (CON) oversight. VPCH cleared this threshold as of the third quarter of 2015 when the facility was deemed fully operational except for the development and implementation of an Electronic Health Record. Dr. Richards soon came on board as Assistant Medical Director, from her previous position running the children's psychiatric unit in Plattsburgh, NY. She trained at The University of Vermont in adult and child psychiatry.

VPCH offers a wide array of design features, recovery spaces, resources, and program supports that contribute to healing and wellness, Dr. Richards observes. Diet, healthy meals, exercise, music therapy, sensory modalities, art, the greenhouse, massage chair, family and social networks all are engaging patients. Flexibility lets people get well. Listening matters. The yard, a smaller unit, less stimuli or whatever is more comfortable for the patient is how Dr. Richards uses the environment of care. She is bringing the Open Dialogue approach to psychiatry staff, learning from the teachings of Robert Whittaker and Vermont's own expert, Sandra Steingard, M.D., the Howard Center's medical director. VPCH has two new psychiatrists, Drs. Genevieve Williamson and Patrick Fintak, both of whom share this philosophy of care. Dr. Richards is sending both new doctors to Open Dialogue training. Veteran staff who were there to open the hospital, Drs. Maria Novas-Schmidt and John Malloy, currently share one position. With the challenges of starting up a new hospital in the first two years accomplished, the hospital is now working on giving patients more flexibility, making efforts to become more progressive, collaborating with communities, developing a shared philosophy, and

optimizing the extraordinary architectural and design features that are based on research findings for patient recovery.

“The hospital is my patient,” explains Dr. Richards, citing the benefit of small units, knowing all the patients, and being aware of everything going on in a hospital the size of VPCH. Almost daily, she is on the phone with the DMH Care Management Team, working out what VPCH can manage, what are the community needs and resources, and what decisions will enable us to balance the factors considered in moving patients through the system so each one will have access to the appropriate level of care when and where they need it, ideally. Thorough preparation and training for the October implementation of a new Electronic Health Record has helped staff to accustom themselves to a very different world than former VSH staff have used up until now. Since the implementation of the Electronic Health Record, almost all clinical work is being completed electronically except for a few processes that VPCH is transitioning from paper to the system.

- **Nursing Leadership Changes**

Two leaders who each have played significant roles in bringing to fruition the development of the Vermont Psychiatric Care Hospital (VPCH) are retiring this year. Chief Nursing Executive Officer, David Mitchell, and Associate Director of Nursing, Kathleen Bushey, have served in multiple capacities as Vermont sought to establish a new, state operated inpatient psychiatric hospital to serve the most acutely ill patients in need of Level I hospitalization. In the coming months, the Vermont Psychiatric Care Hospital will undertake recruitment for both positions. The two nursing leaders have contributed very significantly to the transition from the former Vermont State Hospital to the 8-bed Green Mountain Psychiatric Center in Morrisville during a period of crisis following Tropical Storm Irene and the closure of VSH. Two and a half years ago, they again helped lead the transition to the new state-of-the-art Vermont Psychiatric Care Hospital with a totally different patient care environment with extraordinary potential for patient recovery as well as organizational, operational, and clinical challenges as staff acclimated to the expansive space and how best to utilize the many new features designed to support recovery. DMH wishes David Mitchell and Kathy Bushey the very best of life’s next chapter as they depart VPCH. Filling the role of Chief Nursing Executive Officer on an interim basis is Scott Perry, RN, an experienced nursing administrator at VPCH who knows the staff and systems well. A search process for nursing executive leadership will begin in 2017.

HEALTH CARE AND WELLNESS

- **Worksite Wellness Initiatives**

Worksites play an important role in promoting physical activity, healthy food, and other healthy behaviors. Worksite wellness programs and policies are essential to reducing chronic disease risk factors. Over 60% of Vermont adults employed outside their home are either overweight or obese and over half have at least one chronic condition.

Chronic disease places a significant financial burden on employers related to healthcare costs and loss in productivity. Worksite wellness programs help improve an employer's bottom line. A study published in the American Journal of Health Promotion indicated that employers with worksite health promotion programs see:

- 27% reduction in sick leave absenteeism.
- 26% reduction in health costs.
- 32% decrease in workers' compensation and disability claims.
- Overall wellness return on investment (ROI) average savings of \$5.81 for every dollar invested.

There are six key strategies that worksites can adopt to improve the health of their employees:

1. Implement healthy food and beverage policies.
 - ✓ Healthy vending machine standards.
 - ✓ Healthy cafeteria choices.
 - ✓ Healthy meeting policies.
2. Go tobacco-free.
 - ✓ Create a campus-wide tobacco free policy.
 - ✓ Support tobacco cessation efforts.
3. Provide refrigerators, microwaves, and break areas.
 - ✓ Support employees in bringing food from home rather than eating out.
4. Help employees to get 30 minutes of physical activity a day.
 - ✓ Provide on-site bike racks, fitness space, showers, locker rooms, inviting stairwells, and/or walking paths.
5. Support local food initiatives.
 - ✓ Offer an on-site community supported agriculture program.
 - ✓ Organize a company garden.
 - ✓ Provide local food in the cafeteria.
6. Establish breastfeeding policies that support nursing mothers at the workplace.

If you are just implementing a wellness initiative or program, you can follow these three steps to establish a strong foundation for your worksite.

Step One: Assess your worksite

- Identify the individuals that will spearhead wellness initiatives and gain leadership support.
- Assess your worksite to identify any gaps in existing policies and programs.
- Assess the needs and interests of your employees.

Step Two: Identify strategies

- Utilizing the information gained from step one, identify one of the six recommended strategies to implement over the next 6 to 12-month period.

- Develop an implementation plan that includes communicating the strategy to employees.

Step Three: Evaluation

- Evaluate your initiative by assessing employee participation and/or awareness.

Check out the [Creating Healthier Worksites Toolkit](#) for sample policies, templates for assessments, surveys and other resources!

DEPARTMENT OF MENTAL HEALTH

- **The Café for State Employees, Visitors and Staff**

December marks one year since the Department of Corrections moved into the new Waterbury State Office Complex (WSOC). Mental Health followed in January. As the move-in of Agency of Human Services (AHS) offices continued, the Café overlooking the sky-lit atrium established a hospitable presence and informal meeting ground for hundreds of people every day. The Café is a program of the Division for the Blind and Visually Impaired that trains and employs its participants to provide the best customer service possible to Café guests while building their life skills and resumes for future job opportunities. Program outcomes include enhanced self-confidence; appreciation for the art of service; new interest in food and the industry in general; friendships and networks; and employment growth to higher levels of responsibility.

Starting up this new business in a relatively small space designed without program input was a challenge met by innovative leadership, creativity in menu development, and infusion of values derived from the program's historic mission. While the café serves AHS employees and visitors to the WSOC, it also provides remunerative employment and self-support to blind and visually impaired persons under a 1936 federal program, the *Randolph-Sheppard Act*, that was intended to enhance employment opportunities for trained, licensed blind persons to operate facilities that include cafeterias, snack bars and automatic vending machines that are on federal property. Through the enactment of state laws, including Vermont, the program has broadened to include other locations as well. Staffing by individuals with visual impairments or blindness allows them on-the-job training, work experience, financial stability and opportunity that changes the lives of its participants in a way that no other program can compare.

The Café has hit its stride, offering an evolving menu and purchasing from regionally sourced businesses, including the Vermont Coffee Company, Green Mountain Creamery, Distler's Pretzels, Garelick Dairy and Upper Valley Produce. They get ideas from customer feedback, experiment with their own soups and ice cream, and exercise freedom to be creative. The Café is on its way to a fun-filled 2017.

- **Home and Community Based Services (HCBS)**

As a final reminder for Advisory readers, public comment on HCBW rule changes impacting Community Rehabilitation and Treatment (CRT) and Children's Enhanced Family Treatment (EFT) Programs must be submitted by December 31, 2016. Refer to the DMH website here:

<http://mentalhealth.vermont.gov/news/notification-period-public-comment-hcbs-rule-changes-impacts-community-rehabilitation-0>

- **New DMH Website**

If you have accessed the Department website recently, you have noticed something different. In 2014, the Agency of Administration released a new template for state department and state agency websites that is modern, mobile friendly, and easier to navigate. DMH worked diligently for the past few months to upgrade to the new format; the new website (still at the old address) went live earlier this month. Over the coming weeks, DMH will continue to visit the content of its website and to update narratives, phone numbers, and documentation. DMH also will update its manuals and guidance documents to reflect the new website links.

LEGISLATIVE AND REGULATORY

- **Mental Health Advocacy Day**

The *Advisory* informs those interested to save the date of Tuesday, January 31, 2017, for Mental Health Advocacy Day. This has become an annual opportunity for advocates, peers, providers and family members to raise awareness and share experiences with Vermont's mental health system. The event begins at 8:00 a.m. in the Statehouse cafeteria where visitors can meet with their legislators informally or by advance invitation. Speakers are heard from in Room 11 and House and Senate committees are open to the public. NAMI Vermont, The Vermont Association for Mental Health and Addiction Recovery, and Vermont Care Partners are hosting Advocacy Day. Email Laurie Emerson lemerson@namivt.org or call 800-639-6480 for more information.

VERMONT COOPERATIVE FOR PRACTICE IMPROVEMENT

- **Seeking Young Adults and Family Members for Study on EEP**

The Vermont Department of Mental Health (**DMH**) is participating in a multi-year initiative to improve services and supports for adolescents and young adults who are in the early stages of experiencing and struggling with psychosis (i.e. First Episode Psychosis - **FEP**). Within this initiative, DMH has partnered with Dartmouth College and the Vermont Co-operative for Practice Improvement and Innovation (**VCPI**) to conduct a study focused on the experience of young Vermonters and their families who have a history of FEP. This qualitative study will ensure that the personal experiences of affected individuals and families will inform DMH's process to improve services and supports for this population.

Have you or a family member experienced/been diagnosed with psychosis as a young adult?

Do you live in Vermont? Share Your History!

We are interested in learning about your experience with mental health services and other supports.

Dartmouth College & Vermont Department of Mental Health are conducting surveys and interviews during Fall of 2016. We will use the information you share to improve services and supports in Vermont.

STIPENDS ARE AVAILABLE!

To learn more, please contact Rita Johnson: r.johnson11@snhu.edu
1-800-730-5542
Text: 802-249-5094

To take the survey, please go to: <http://vtcpi.org/vermont-fep-study/>

Dartmouth
VCPI
Vermont Cooperative for
Practice Improvement & Innovation

ANNOUNCEMENTS

- **DMH Medical Director Jay Batra, M.D.**

Many readers of the *Advisory* have worked with Dr. Batra during his tenure as Medical Director of the Department of Mental Health and, previously, as Medical Director of the former Vermont State Hospital. Dr. Batra has been a tremendous contributor to the department's clinical oversight and policy course over the last few years. During his time with DMH, Jay has been well regarded and respected by professionals of multiple disciplines both internally and from the field.

At this point in time, Jay plans to further his interests in population health care and integration of both mental health and physical health care as the Director of Behavioral Health at New York University Lutheran Family Health Center (FHC). This organization is a federally-qualified health center (FQHC) recently acquired by New York University Langone Healthcare. It is one of the largest mental health clinics in New York City providing care to over 100,000 people getting health care at the Family Health Center. In addition, they have a Healthy Connections initiative intended to work with children and families who have experienced adversity. The health care organization serves 28 schools in Brooklyn with embedded clinicians in each of those schools.

DMH offers our congratulations to Jay in this newest professional opportunity that he is embarking upon at the end of this year.

- **Tre Evans-Ferrell** joined the Business Office as a Financial Specialist II. Tre has over 15 years in the financial services industry, including the last year and a half at Lamoille County Mental Health Services as a Billing Specialist. He is currently completing his BA in Business Administration with a minor in Human Services. Tre is originally from Mississippi, but moved to

Vermont about 5 years ago, after living in Delaware for 17 years. In his spare time, Tre enjoys reading and talking on the phone with his grandmother at least twice a day.