Short-Term	Mid-Term	Long-Term	End State
Strategy: Memorandum of	Strategy:	Strategy:	End State: Create a coordinated,
understanding between	Data model developed that can	Infrastructure changes to meet	data driven, multi-organizational
impacted organizations. Outlines needs, roles, expectations should a major system bed need suddenly	test a surge capacity plan.	capacity plan from the data model are implemented.	statewide surge capacity plan
arise. Population impact	Population impact	Population impact ⊠ Children	Population impact ⊠ Children ⊠ Adults ⊠ Seniors/Elders
⊠Children	⊠Children	⊠Adults	□ Other:
⊠Adults	⊠Adults	⊠Seniors/Elders	
⊠Seniors/Elders	⊠Seniors/Elders	□Other:	1. Steps to accomplish this
□Other:	□Other:		2.
1. Steps to accomplish this	 Steps to accomplish this 2. 	Steps to accomplish this	
Strategy: Review EBPs that may already exist and assess what is in place now.	Strategy: Build a sustainability plan	Strategy: Evaluate and reflect	End State: A fully developed and sustainable peer support network integrated into the Continuum of
·		Population impact	Care,
Population impact	Population impact	□Children	
⊠Children	□Children	□Adults	Population impact
⊠Adults	□Adults	☐Seniors/Elders	□Children
⊠Seniors/Elders	☐Seniors/Elders	□Other:	□Adults
□Other:	□Other:		☐Seniors/Elders
		Steps:	□Other:

2019 Steps: Steps:

- Engage peers in development about what has/would work.
- Form peer support advisory committee for DMH, time limited and goal focused
- Coordinate with SU and recovery community for integration and lessons learned
- Use LEAN tools or SWOT framework (quality informed process)
- Discover what resources and current systems/peer networks exist
- Determine definition of peer, competencies, pay, ethical challenges, philosophical differences
- Establish needed trainings and budget
- Identify a pilot site or expand on an

- Identify and grow stakeholders
- What other entities could buy-in
- Education and outreach about the value of peers
- Pilot sites operating?

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- Solicit customer satisfaction
- Examine success markers
- Have we fulfilled the mandate we intended to?
- Evaluate selves or ask for an outside evaluator

Steps:

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existing network to have peers in hospitals (how to fund?)			
Strategy: Define Success and identify wait times across health care system for parity	Strategy: Fully fund activities or entities that could aid in deescalation or altered and extreme states	Strategy: Improve system flow, expand available places for people to discharge to at the level of care they need when they need it	End State: Reduce number of visits and length of stay for those presenting at the ER for MH issues, to align with physical health care system for parity
Population impact Children Adults Seniors/Elders Other:	Population impact ☐ Children ☐ Adults ☐ Seniors/Elders ☐ Other:	Population impact ☐ Children ☐ Adults ☐ Seniors/Elders ☐ Other:	Population impact Children Adults Seniors/Elders Other:
 Identify data needed Identify relationships (MOUs) needed Review data already available Form an advisory group Review EBPs PDSA framework Define what 'reduce' means Expand access to transportation Expand capacity of mobile crisis to 	Steps: • Educate how/where to access MH services and supports • Expand more community supports (like warm lines, Soteria, Assist etc.) • Reduce criteria or need for diagnosis to get specific supports • Co-locate community-based services run by peers with respite beds • Stable, supportive housing available to all	Steps: Test the model for improved system flow (currently being drafted with VAAS/VCP?) Ensure reduction in LOS is because they are receiving the right services for the appropriate amount of time (UR)	Steps:

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culture of dignity and respect

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is at the forefront of all	Population impact	Population impact	
conversations	□Children	□Children	Population impact
	□Adults	□Adults	□Children
	☐Seniors/Elders	☐ Seniors/Elders	□Adults
Population impact	□Other:	□Other:	☐ Seniors/Elders
□Children			□ Other:
□Adults	Steps:	Steps:	
☐Seniors/Elders		·	Steps:
□Other:			
Steps:			
 Structures in place to 			
make sure people			
have a voice and			
influence			
 Stipends/supports 			
for participants			
 Assessments of 			
attitude and burn out			
 Provide education 			
and supports to staff,			
service providers,			
and care givers etc.			
(front line staff) to			
maintain their own			
wellness and avoid			
compassion fatigue			
 Promote a trauma 			
informed workplace,			
reconnect with sense			
of empathy, help			
supervisors learn			
about how to			

2019	Send follow-up comments/questions to: Jennifer.rowell@vermont.gov
support staff and assess wellbeing Align with healthcare world and their approach Identify wellness programs that exist now Strengthen provider relationships, move toward stronger, more collaborative partnerships Formal information sharing amongst providers Look at UVMMC's patent advisory group, known to be very empowering	Send follow-up comments/questions to: Jennifer.rowell@vermont.gov
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