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6/27/2024

**Children, Adolescent and Family State Program Standing Committee Minutes**

**DRAFT**

State Program Standing Committee for Children, Adolescent and Family Mental Health

**Present Members:**  Cinn Smith, Chair  Laurie Mulhurn  Ron Bos Lun, Chair  Sunny Naughton  Karen Carreira

**DMH/State Staff:**  Gillian Shapiro  Megan Shedaker  Puja Senning  Dana Robson  Eva Dayon

**Public:**  Rachel Cummings  LuAnn Chiola  Aaron Kelly  Mary Butler

<b>Business</b> <ul style="list-style-type: none"><li>- Introductions, Identify Timekeeper</li><li>- Review agenda for September meeting<ul style="list-style-type: none"><li>o Review Grievance and Appeals Data</li><li>o System of Care Recommendations</li></ul></li><li>- Review June meeting minutes</li></ul>	- 9:00 – 9:15
<ul style="list-style-type: none"><li>• DMH Updates by Eva Dayon on -<ul style="list-style-type: none"><li>o Value Based Payment Crosswalk with CCBHC</li><li>o Update on S192 Psychiatric Residential Treatment Facility (PRTF)</li><li>o Admin Rule Public Comment Period</li></ul></li></ul>	9:15 – 10:15
<ul style="list-style-type: none"><li>• SOC Recommendations?</li></ul>	10:15 – 10:55
<ul style="list-style-type: none"><li>• Public Comment Period</li></ul>	10:55 – 11:00
<ul style="list-style-type: none"><li>• Adjourn Meeting</li></ul>	11:00

<b>Agenda Item</b>	Discussion (follow up items in yellow)	2 members needed for a quorum vote
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<p><b>Review September agenda and June Minutes</b></p>	<ul style="list-style-type: none"> <li>- Members voted to finalize the June meeting minutes.</li> <li>- Members reviewed the September agenda. Puja added in that Tara Miller from DMH will be presenting S189 which establishes guidelines for first responders working with someone who is experiencing a mental health crisis.</li> </ul>
<p><b>DMH – Update on CCBHC with Eva Dayon</b></p>	<ul style="list-style-type: none"> <li>- Eva presented on Value Based Payment (extra payments to DAs/SSAs for achieving certain benchmarks) and how these measures differ from the CCBHC model requirements. These benchmarks include Access to Care data points (max of 5 days to get an initial face-to-face appointment after initial contact with the agency), as well as, a baseline percentage of CYFS clients who have been screened with the Child and Adolescent Needs and Strengths (CANS) every 6 months. Vermont has been chosen as a Demonstration State for CCBHC. Thus, Vermont will be certifying CCBHCs soon. DMH is hoping to certify Clara Martin Center and Rutland Mental Health Services by July 1<sup>st</sup> of 2025. CCBHC require ramping up of services and paying for services a bit differently – DMH will see how the legislature funds future CCBHCs.</li> <li>- SAMSHA offers an enhanced match to increase Medicaid payments for services and it is unknown how long this match funding will run. There is a pressure for other community mental health centers to become CCBHC asap for this reason.</li> <li>- Karen expressed a desire to keep the Access to Care payments continue to exist for VT CCBHCs even though they are more stringent than the CCBHC measures.</li> <li>- CCBHC does not require a screening for substance use for CYFS clients, whereas VT currently does do this.</li> <li>- Eva presented on Psychiatric Residential Treatment Facility (PRTF) – this just got passed in the legislature in 2024. The goal date for launching this facility is Fall 2024 for youth age 12-21.</li> <li>- The legislation requires that these youth have access to a full time patient advocate who is a peer. We currently don't do this for CYFS clients. Previous grants have been with Vermont Psychiatric Survivors to offer patient advocacy. We are also looking at where the funding for this position may come from.</li> <li>- The DMH Administrative Rule update continues to happen. Currently, we are in the Public Comment Period.</li> <li>- Mental Health Block Grant (MHBG) – distributed from SAMSHA to states when deinstitutionalization was happening and still continues today. SAMSHA is also coming for a site</li> </ul>

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	visit to learn about how Vermont is administering their MHBG funds and the system of care, generally.
<b>SOC Recommendations?</b>	<ul style="list-style-type: none"><li>- System of Care Recommendations – when Act 264 Board and C-SPSC were joined, they would make a SOC Recommendation annually which is published in SIT’s Annual System of Care Recommendations report.</li><li>- Laurie is concerned that now that were moving towards CCBHC there are many changes and so she would especially like the SOC recommendations to capture family voice</li><li>- Cinn offered that there were no written SOC Recommendations for the first ten years she was on these committees</li><li>- The Act 264 Board does do SOC Recommendations – and they send a survey annually to the Local Interagency Teams (LITs)</li><li>- We could share/chime into the Act 264 Board’s SOC Recs</li><li>- We decided to continue this discussion further at our Fall meetings</li></ul>
<b>Public Comment Period</b>	-
<b>11:00 Meeting Adjournment</b>	- Meeting adjourned at 11:00