

# Act 264 Advisory Board Meeting Minutes

Friday, February 23, 2024

9:30-12:00

**Board Members Present:** Cinn Smith, Matt Wolf, Heather Freeman, Laurie Mulhern, Alice Maynard, Cheryl Huntley, Doug Norford, Megean Martin (9:30-11:20)

**Regrets:** Kris Holsman-Francoeur

**State Staff:** Cheryle Wilcox, Beth Sausville (9:50-10:10)

**Members of the Public:** Julia Pritchard, Sandi Yandow, Amy Lincoln Moore (joined at 10:20)

Follow ups in yellow highlight

Looking for information about Act 264? Please go here: <https://ifs.vermont.gov/docs/sit>

Agenda Item	Discussion Notes
1. Approve meeting minutes from January meeting 2. Current Board membership 3. Discuss the possibility of inviting someone from the VT Police Academy to share (1) an overview of the current training curriculum for law enforcement officers regarding people, especially children, who have mental health issues, (2) their estimate of what percentage of current law enforcement personnel have had this training, and (3) their assessment of the need for potential improvements/updates. 4. Update from Beth Sausville on DCF data system	<p><b>Meeting Minutes:</b></p> <ul style="list-style-type: none"><li>• Alice moved to approve meeting minutes with edits. Laurie seconded.</li><li>• Approved unanimously.</li></ul> <p><b>Membership Update:</b></p> <ul style="list-style-type: none"><li>• Co-Chairs: Cinn Smith &amp; Matt Wolf; Parents: Laurie Mulhern, Cinn Smith, Kristin Francoeur-Holsman; Providers: Cheryl Huntley, Doug Norford, Heather Freeman; Advocates: Alice Maynard, Matt Wolf. Meagan Martin—confirm role? Meagan is in the role of advocate. The BOARD IS FULL!!!</li><li>• Julia Pritchard joined today—the Board is currently full, and the Board would love to have you attend as a member of the public.</li></ul> <p><b>Discuss the possibility of inviting someone from the VT Police Academy to share (1) an overview of the current training curriculum for law enforcement officers regarding people, especially children, who have mental health issues, (2) their estimate of what percentage of current law enforcement personnel have had this training, and (3) their assessment of the need for potential improvements/updates.</b></p> <ul style="list-style-type: none"><li>• Alice brought this up given the high needs of adults and children for mental health and would like to hear what training they receive.</li><li>• Laurie shared recent news story: <a href="https://www.vermontpublic.org/local-news/2024-01-31/burlington-sued-over-claims-of-excessive-force-and-inappropriate-ketamine-use-on-14-year-old">https://www.vermontpublic.org/local-news/2024-01-31/burlington-sued-over-claims-of-excessive-force-and-inappropriate-ketamine-use-on-14-year-old</a></li><li>• Want to be sure we talk about this in the context of mobile crisis and the work happening to move things forward in that realm.</li></ul>

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	<ul style="list-style-type: none"> <li>• This discussion is intended to be collaborative and problem-solving with police.</li> <li>• Cheryle Wilcox shared that she did a reach out to Mourning Fox at the Dept of Public Safety (former Dept of Mental Health Deputy Commissioner). He is willing to come and share the work he is doing related to training law enforcement about the mental health needs of Vermonters.</li> <li>• Doug shared they have someone who works at Rutland Mental Health (RMH) who did training for law enforcement for 20 years. He will check with her to see who at the Police Academy would be good to reach out to.</li> <li>• Cinn shared that as a Parent Representative, when doing proactive crisis plans at CSPs, she advises parents to have several copies at their house so, if police are called, they can share the information.</li> <li>• Megan shared that all personnel for state police, city police, county sheriffs, and game wardens go through the same training at the Police Academy.</li> <li>• Board decided to start by inviting Mourning Fox, hearing from him, and then deciding how to proceed with engaging in further discussion about this issue with others. <b>Cheryle will do reach out.</b></li> </ul> <p><b>Update from Beth Sausville on DCF data system</b></p> <ul style="list-style-type: none"> <li>• Expressed appreciation for the Board’s interest in this and support of their need for a data system.</li> <li>• State of the state is that the only funds currently available are \$4.8M in carry forward that Family Services (FSD) has been allowed to keep in their budget. The total amount projected for completion is around \$40M; the state of VT has to come up with 50% of that because it is eligible for federal match.</li> <li>• Due to the funding available, FSD is looking at doing this in modules as stages.</li> <li>• FSD is further ahead than they have ever been with moving forward with a data system.</li> <li>• Who is the best point person for the Board to connect to for advocating to keep this in focus? <b>Beth will follow up and let the Board know.</b></li> </ul>
<p>Discuss letter from Chittenden LIT re: educational issues for youth <b>Letter Attached for reference</b></p>	<ul style="list-style-type: none"> <li>• A Board member shared that schools are being put in the middle based on policy. There is an increased number of requests for alternative placements for youth because schools cannot hire staff with specific skills for some students with special needs. However, there are long waiting lists, and no one has room.</li> </ul>

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	<ul style="list-style-type: none"> <li>• There is concern about building out-of-district schools. How do we use those resources to provide more supports in our current schools?</li> <li>• Cheryle shared updates about yesterday’s SIT discussion about the letter. The notes from SIT follow in italics: <ul style="list-style-type: none"> <li>○ <i>Our system is struggling with youth who have developmental delays (DD).</i></li> <li>○ <i>There is a moratorium on independent schools and that is a problem given that some programs have closed.</i></li> <li>○ <i>Moratorium was put in effect due to a Supreme Court decision that said public funds couldn’t go to religious schools because of possible discrimination that could occur.</i></li> <li>○ <i>Youth can be on a Developmental Services (DS) Waiver and in school still.</i></li> <li>○ <i>Placing students in residential programs due to a lack of educational options is not appropriate.</i></li> <li>○ <i>The Agency of Education (AOE) is getting more requests for residential programs than before.</i></li> <li>○ <i>Dana shared she has been talking to Department of Disabilities, Aging and Independent Living (DAIL) staff recently regarding students who have been denied waivers due to being in school. DAIL has clarified this isn’t mutually exclusive; youth can be eligible for a DS waiver even when they are in school.</i></li> <li>○ <i>Capacity in alternative schools is severely diminished due to workforce challenges.</i></li> <li>○ <i>Dana asked if we can pull data together where we think the lack of an adequate school placement has led to residential referrals.</i></li> <li>○ <i>There is a lack of educational placements for youth with DS.</i></li> <li>○ <i>Currently, there are 18/19 youth at one program in NH (Easter Seals); all are DS eligible, 6 years old to 18 years old.</i></li> <li>○ <i>Shared with SIT there is an Agency of Human Services (AHS) group that came together to work on the Psychiatric Residential Treatment Facility that same group is now focused on addressing the needs of youth with DD—related to level of care, services, and crisis bed access. (Vermont Crisis Intervention Network beds have not been used by any youth in two years due to adults with DD and other complex issues being in the beds without a place to go).</i></li> <li>○ <i>25% of youth placed through the Case Review Committee (CRC) right now have developmental disabilities—point in time as of today that Dana looked at during the meeting. Most of these youth are in out-of-state placements.</i></li> </ul> </li> </ul>

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	<ul style="list-style-type: none"> <li>○ <i>Just yesterday Melanie D'Amico heard from a Designated Agency (DA) that they did not need to do developmental service eligibility for a youth in DCF custody. She had to push back hard and clarify. Need to follow up with DAIL staff.</i></li> <li>○ <i>Ask Howard Center to gather local data to share about this issue that they are seeing. How do they advocate with their legislators and highlight this to others?</i></li> <li>○ <i>Need to communicate about how we are working across departments and agencies to highlight and move on the issue of children with DD; we need to push this issue.</i></li> <li>● From Sandi Yandow, Vermont Federation of Families for Children's Mental Health (VFFCMH): Part of the take away from SIT for VFFCMH to focus on is the unintended consequence of H483 (the moratorium); now the higher need placement for DS children and youth is out of state at Easter Seals in NH. This puts an added burden on already stressed families.</li> <li>● Families of children with special health needs through Vermont Family Network (VFN) have formed a group and a lot of information can be found about the educational piece and youth not being served.</li> <li>● Years ago the Brattleboro Retreat had an independent school. What happened to that? Cheryle will get information. Cheryle checked in with a colleague at the Agency of Education. Her response was: Due to staffing shortages, the Retreat closed their school several years ago.</li> <li>● Discussed the evaluation of Integrated Family Services (IFS) that is being done currently to see what worked well, what were challenges, and how do we use what we learned to inform our system going forward?</li> <li>● Is there a way to increase education for early services and more early intervention? How do we highlight this as a Board? <b>Could the Board work with Children's Integrated Services to teach them about CSPs?</b> The Child Development Division joined SIT about 6 years ago to make the connection tighter across the age span which was one step in the right direction.</li> <li>● Applied Behavior Analysis rate through the Department of Vermont Health Access is not feasible for most Designated Agencies (DA) to be able to provide the service. This has meant many DAs have had to stop providing this which was a way to provide supports to families.</li> <li>● It appears that we have been underfunding DS for children and adolescents and putting the service burden on education and other AHS systems to make up for it.</li> </ul>

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	<ul style="list-style-type: none"> <li>• There was a policy decision at DAIL to not serve children many years ago (beyond Bridge and highest needs through equity) and the question was asked about why they haven't changed that? That decision could be changed. The Board could help with that.</li> <li>• Laurie shared that as a Parent Representative she brought CSP information to all physicians' offices to make sure they were aware of it. Due to staff turnover, this may have been lost. What effort can the Board make to help with this? What about office of professional licensing? Could CSP information go out with that? Emphasize this is for children with any one of 16 disabilities. <ul style="list-style-type: none"> <li>○ Could there be question when the Department of Health Commissioner comes this year to ask about how to make this happen in a systemic way?</li> </ul> </li> </ul>
<p><b>Meeting in March with Laurel Omland, Dr. Haley McGowan, and Marianna Donnally. What would Board members like to hear about?</b></p>	<p><b>Questions:</b></p> <ol style="list-style-type: none"> <li>1. Laurel: Update on conflict-free case management work.</li> <li>2. Who do we need to build relationships with across systems? The value of knowing each other so we can engage in creative thinking with each other. The consequences of covid is fragmentation and not being with people in person. Getting to know each other IS PART of the job.</li> <li>3. Laurel: Where do things stand with the School-Based Mental Health reform group?</li> <li>4. Update on last cohort of Project Advancing Wellness and Resiliency in Education (AWARE) and what is happening with the new group?</li> <li>5. Would like to hear more about the pilots happening for short-term stabilization (Alternatives to Emergency Dept initiatives).</li> <li>6. What work are you aware of to support transgender youth?</li> <li>7. Dr. McGowan: <ol style="list-style-type: none"> <li>a. Update on what you are seeing happening with children/youth waiting in Emergency Departments (ED)?</li> <li>b. Did the ED learn or shift practices over the last three years with the number of children waiting in EDs?</li> <li>c. What would your biggest wish for change be for children with mental health needs within the health care system?</li> </ol> </li> </ol>
<p><b>Summary of how we are paying parent representatives</b></p>	<ul style="list-style-type: none"> <li>• Status: through June 2024: <ul style="list-style-type: none"> <li>○ DMH will continue paying independent Parent Representatives through Mental Health Block Grant funds.</li> <li>○ Vermont Family Network grant will continue to pay for their Parent Representatives.</li> </ul> </li> <li>• A Request for Proposals will be going out to ask for an entity to provide training, support and payment to Parent Representatives for</li> </ul>

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	<p>Act 264 activities. The funding source will also be from the Mental Health Block Grant.</p> <ul style="list-style-type: none"> <li>• Moving forward in the next fiscal year, a letter has been drafted from SIT co-chairs that will be going to all Commissioners and the Secretary of the Agency of Education to request ongoing shared funding to support this work.</li> </ul>
<p><b>Discussion about equity in schools for children/youth who are transgender</b></p>	<p>Heather Freeman shared that they are addressing this through their Equity focus. The work this year has been to draft an "Equity Policy Implementation Plan" (after the Equity Policy was adopted last year). All students in grades K-2 across their supervisory union (SU) participate in an anti-racist story time which focuses on not just race, but other identities as well.</p> <p>Meagan Martin shared this resource: <a href="https://www.pcavt.org/we-care-elementary">https://www.pcavt.org/we-care-elementary</a></p>
<p><b>Collecting CSP data moving forward</b></p>	<ul style="list-style-type: none"> <li>• Collecting data from Parent Representatives helps with tracking, but not every Coordinated Services Plan (CSP) meeting is attended by a Parent Representative.</li> <li>• Cheryl Huntley shared that she talked when she was at the Counseling Services of Addison County (CSAC) about having it be a non-billable data entry item in the Electronic Health Record. An administrative person could do this if they had a list of CSPs that happened. It seemed like it could be an easy lift. We could go to the Vermont Care Partners group to discuss how to do data tracking. The youth does not need to be open to the Designated Agency. DAs are at all the CSP meetings so they could do the tracking. <ul style="list-style-type: none"> <li>○ Talk to Executive Director, Simone Rueschmeyer, at Vermont Care Partners about where this discussion could happen, in which group? <b>Cheryl Huntley will follow up with Simone.</b></li> </ul> </li> <li>• The Rutland LIT Coordinator has a form for a provider to fill out if they want to request a CSP and collects some data.</li> </ul>
<p><b>Public Comment</b></p>	<ul style="list-style-type: none"> <li>• No public comment today.</li> </ul>
<p><b>Next Steps</b></p>	<p><b>Possible future meeting topics:</b></p> <ul style="list-style-type: none"> <li>• Certified Community Behavioral Health Clinics (CCBHC)—hearing about this work and what it means for the system? Cheryle W. can assist having someone come to talk more about this. Also, Laurie Mulhern is on the CCBHC advisory committee.</li> </ul>

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	<ul style="list-style-type: none"> <li data-bbox="532 239 862 268">• Youth Council Update</li> </ul>
<p data-bbox="136 411 480 554"><b>Follow up responses from DAIL Commissioner White’s Visit to the Board in November 2023</b></p>	<p data-bbox="532 411 1474 684"><b>We have heard that there has been an increase in residential placements (including out-of-state residential placements) for children and adolescents with developmental disabilities, which is in contrast to your department’s long-standing stated goals and practice. Could you confirm or disclaim this situation? If confirmed, could you explain contributing factors and any actions your department has been/is taking to reverse this situation?</b></p> <p data-bbox="532 695 1463 968">Answer: Yes, this is accurate. DDS presented 9 CRC requests during FY23 and 4 of these children/adolescents were admitted to an out-of-state residential program. DDS carefully reviews each request for a residential placement to ensure all other in-state resources have been exhausted and each child requires this level of care to meet their health and safety needs. Out-of-state programs continue to be the last option explored to meet the needs of these young Vermonters.</p> <p data-bbox="532 1020 1474 1167"><b>In the past, there were significant challenges in paying for services for children and adolescents who had double disability of a developmental disability and a mental health disability. Is this still a significant challenge? If so, why? If not, what changed?</b></p> <p data-bbox="532 1178 1484 1577">Answer: There can sometimes be challenges when supporting individuals with co-occurring diagnoses because funding streams have different rules. While we will be taking advantage of breaking down these kinds of barriers as much as possible as we move through our Payment Reform initiative, we are fortunate to be strengthening our partnerships across Department for Children and Families and Department of Mental Health. When conversations start with “what are the needs for the child and family” and “what are the best practices for support” as opposed to “this kid is ‘yours’” or “this family isn’t one of ‘ours’”, collaboration on all levels seems much easier.</p>