

Beth Sigtler and Mary Moulton: Community Mental Health Workforce Stabilization Will Bolster System

A hospital CEO recently asked a provocative question regarding the Vermont Designated Agency system as it faces chronic underfunding and increasing responsibilities: “Why should community mental health workers be paid the same as State workers?”

On behalf of the 13,500 people working at community mental health centers, we want to answer that question. In fact, there are many good reasons the Vermont legislature is considering salary parity. Our unique Vermont system is one where private, non-profit agencies sub-contract with the State to provide a network of specialized supports to people with mental illness, substance use disorders and intellectual disabilities. Not only do we work to improve the health of the people we support - in collaboration with primary care providers and community health teams - we also support their full inclusion into the community and schools, educate our communities to remediate stigmatization, and provide workforce supports that strengthen Vermont’s economy.

The Designated and Specialized Service Agencies in Vermont boast a proud history of leadership and successful outcomes. (FY’16 outcomes report: http://vermontcarepartners.org/portfolio/files/8-10451_FINAL2016_VCP-Outcomes_WEB_021617.pdf). Year after year we serve Vermonters with budgets which often remain level-funded, or face cuts – even as responsibilities increase, broaden or become more complex. We’re at a critical point in our need for improved funding to maintain our workforce, which is experiencing unprecedented vacancy and turnover rates.

You may not always see the work we’re doing. Our network brings stability to thousands of Vermonters in communities statewide, and you likely know someone who is impacted by our work. Our system cares for over 35,000 clients annually, and touches the lives of 50,000 Vermonters. And while the pressures of adult emergency room crowding appears in the news, children and families comprise one of the largest populations served through Designated Agencies. Nearly 11,000 children are directly served and thousands more – whole families – are supported by case management, therapy, and in-school supports from early childhood through high school. Designated agencies also successfully divert an average of 70% of individuals in crisis out of emergency rooms, avoiding hospitalization, entering a less expensive crisis bed or returning to the community with referrals for follow-up treatment.

The successes we have achieved are the result of an organized and thoughtfully deployed system. In the 1930’s the Vermont State Hospital was institutionalizing over 1700 patients, but by 2013, when Tropical Storm Irene flooded and destroyed the Vermont State Hospital, this number had decreased to 53 beds. This is a direct result of the community mental health system’s work with hospitals and community health providers. It’s a system which employs community case managers who help people to find housing, manage money, and arrange transportation to psychiatric, medical, therapeutic, dental, and other appointments. We assist in finding employment and respond to acute and severe emergencies, both individually and community-wide.

Emergency response teams were developed to support Vermonters in the midst of mental health crises, often doing pre-crisis supports, helping people to stay in the comfort of their homes rather than being

admitted to a hospital bed. Emergency services are available through 24/7 hotlines, which take thousands of calls every year, responding daily to individual homes, hospitals, schools, police stations, courts, and other settings. We have employed a highly-trained, dedicated and talented workforce; and the reality is that our employees are leaving our agencies to work in other positions because they can't afford to work in our system. Currently we have a 26% turnover rate, with over 400 vacancies statewide. And yet, our employee satisfaction (with exception of pay) is regularly one of the highest in the state.

Community mental health centers also recognize that stable housing is integral to a productive and rewarding life. Despite limited funds our agencies have stretched to develop a variety of housing options. Today, the Designated and Specialized Service Agencies lease, own, and contract for more than 2000 units of housing for people with mental illness and developmental disabilities. These range from individual apartments, to group homes for greater support, crisis beds to divert from more expensive and restrictive hospitalizations, shared living providers, staffed living arrangements, and individual apartment units specifically for those who have difficulty finding and staying in housing. With fiscal pressures mounting, the concerns regarding the sustainability of these vital resources increase.

Vermont's progressive and successful Developmental Disabilities system also provides vital supports. Vermont was the first state (second if you ask New Hampshire) to conscientiously close its institutions. Brandon Training School closed in 1993 when the State chose to focus on community-based supports, housing, and employment for people with mental health and intellectual disabilities. This decision was the result of an intentional and wise collaboration between the Designated Agency system, the University of Vermont, and the State, which collectively agreed that institutions and congregate settings were no good for Vermonters. We've been leaders ever since.

In fact, last month Vermont earned an Innovative Policy award by the World Future Council in Vienna, Austria. This was a prestigious acknowledgment of our move to community-based supported employment for people with intellectual disabilities and autism in 1980. Three Vermonters, Bryan Dague, (University of Vermont), Lisa Culbertson (Upper Valley Services) and Elizabeth Sightler (CCS, signed here) attended as emissaries of the system. They presented our state-wide system to over 500 world leaders in supported employment during a seminar at the Zero Project Conference held at the United Nations in Vienna. Leaders from around the world wondered how we get such high employment, profound outcomes, and they want to know what's next.

Why are other countries looking to Vermont for leadership? Because 48 percent of Vermonters supported in our Developmental Service system are employed in community businesses or are business owners themselves, as compared to the U.S. average of 19 percent. Our high employment rate means more dollars returned to our state in reduced social security and increased income taxes, as well as robust impacts on social determinants of health such as satisfaction, stability, and natural community connections. Additionally, as Developmental Disabilities Service Providers, we're building rewarding partnerships with community members, business owners, hospitals, FQHCs, Universities and secondary schools. Our work supports independence, person-centered success, more robust health and financial

stability. Most importantly, the people supported by the system are living healthier, more productive, and happier lives because of the work we do.

Why should our workers be paid the same as hospital workers, or State workers, or educators?

- Because our work keeps people with complex needs healthy, safe, and contributing to our state
- Because we support vulnerable Vermonters – sometimes for their entire lives – with caring, effective, world-class supports.
- Because we respond to often highly-charged emergencies throughout the community, requiring experienced clinical skills.
- Because our highly skilled clinicians - through counseling for substance use disorders and mental health issues - help people to steer a course towards recovery.
- Because we integrate with healthcare providers in ways that build shared, comprehensive care plans.
- Because our work contributes to the state economy with workforce development, health, and stability
- Because we deliver outcomes of which Vermont should be proud
- Because underfunding has left our staff without a responsible, fair, livable wage causing the erosion of an admirable system that needs to be there for you and your family in times of crisis.

For further information check out www.vermontcarepartners.org

Mary Moulton, MPA is the Executive Director of **Washington County Mental Health Services** which is a Designated Agency that provides support and treatment opportunities for children, adolescents, families, and adults living with the challenges of mental illness, emotional issues, and developmental disabilities. She is also the **President of the Vermont Council of Developmental and Mental Health Services**; a trade association of 16 non-profit community-based agencies that serve Vermonters affected by developmental disabilities, mental health conditions and substance use disorders.

Elizabeth Sightler is the Executive Director of **Champlain Community Services** in Colchester, Vermont a Specialized Service Agency within the Vermont Designated Agency system serving Vermonters with intellectual disabilities and autism. She is also the **President of Vermont Care Network**, a provider network of 16 non-profit community-based agencies that serve Vermonters affected by developmental disabilities, mental health conditions and substance use disorders.