

Town of Richmond

Request for Special

Appropriations Request for

Fiscal Year: 2024

Organization's Name: Lund Family Center

Address: 50 Joy Drive

City, State, Zip: South Burlington, VT 05403

Website address: www.lundvt.org

A. GENERAL INFORMATION

1. Program Name: Lund General Operating
2. Contact Person/Title: Sharon Lifschutz, Director of Development

Telephone Number: 802-861-2580

E-mail address: sharonl@lundvt.org

3. Total number of individuals served in the last complete fiscal year by this program:
5,400 individuals were served in FY22.
4. Total number of the above individuals who are Town residents: 23 individuals
Please, attach any documentation that supports this number.
 - This number came from our Electronic Health Records system.

Percent of people served who are Town residents: .4%

5. Amount of Request: \$1,000
6. Total Program Budget: \$10,646,611 Percent of total program budget you are requesting from the Town of Richmond: %.009
7. Please state or attach the mission of your agency: Lund helps children thrive my empowering families to break cycles of poverty, addiction and abuse. Lund offers hope and opportunity to families through education, treatment, family support and adoption.
8. Funding will be used to:
 X Maintain an existing program Expand an Existing Program
 Start a new program
9. Has your organization received funds from the Town in the past for this or a similar program? Yes

If yes, please answer the following:

- a. Does the amount of your request represent an increase over your previous appropriation? If yes, explain the reason(s) for the increase.

No

- b. Were any conditions or restrictions placed on the funds by the Selectboard? _____
If yes, describe how those conditions or restrictions have been met.
No

PROGRAM OVERVIEW

Statement of Need: Identify the issue or need that the program will address (use statistical data to justify the need for the program). To what extent does this need, or problem exist in the Town of Richmond?

As families navigate a world that continues to open up during COVID-19, Lund has seen two areas of need that directly impact residents in the Town of Richmond: building family supports and treatment for substance use.

Family Support

In order to enhance child development and reduce the likelihood of child abuse and neglect, research shows the need to increase family strengths and supports to families. With a rise in significant mental health challenges in children, the need to ensure basic needs are met and to improve social and emotional wellbeing of children is even more critical. A report from Voices for Vermont's Children, a nonprofit aimed to improve child wellbeing, found that between 2016 and 2020 in Vermont, "the number of 3-to-17 year olds experiencing depression had already increased by 40%" which has only continued to rise due to the acute and ongoing impacts of the COVID-19 pandemic. However, we cannot prioritize meeting children's' basic needs and improving their social and emotional wellbeing without ensuring that families have the supports to meet those needs. By understanding additional barriers to accessing family supports, such as poverty, racial and culture issues, stigma, cycles of addiction and cycles of abuse, Lund is well positioned to continue to make an impact for children and families across Vermont. Specific Lund programs that help build family supports and that are utilized by Town Residents in FY22 include Post-Permanency Adoption services and Lund's Family Education services.

Treatment for Substance Use:

Vermont is suffering from one of the most devastating public health crises of our time, the current opioid epidemic. According to the Center of Rural Addiction through the University of Vermont, accidental overdose deaths have increased more than 300% in rural areas with very few treatment options. In 2021, 210 Vermont residents died from an opioid related overdose, a 33% increase from 2020. This is the highest number of fatal opioid overdoses ever recorded in Vermont. These statistics alone showcase the need for prevention programs aimed at addressing Substance Use Disorders (SUD), and the often co-occurring mental health challenges that often SUD. Last year, town Residents utilized two services through our Residential and Community treatment department: Outpatient Treatment and the Regional Partnership Program (RPP).

1. Program Summary:

- a. Identify the target/recipients of program services. Specify the number of Town residents your program will serve during the fiscal year and explain the basis upon which this number is calculated. Indicate any eligibility requirements your program has with respect to age, gender, income or residence.

Vermont families are struggling, and Lund is on the front lines providing critical supports to children and families across the State. Many of the families we serve are among Vermont's most vulnerable populations including-but not limited to-those navigating substance use and/or mental health disorders, incarcerated women and their families, older children in state custody waiting to find their forever home, and those entrenched in generational poverty. While programs, like childcare and Lund's Residential Treatment Program, have eligibility requirements based on age, most programs are open to all.

We anticipate our services will support 25 Town residents. This number is calculated by looking at past trends and estimating an increase in Lund staffing, which would allow for more children and families to be served,

b. Identify what is to be accomplished or what change will occur from participating in the program. How will people be better off as a result of participating in the program? Describe the steps you take to make the project known to the public, and make the program accessible and inclusive?

By participating in Lund's programs, family strengths will increase, child development will be enhanced, and the likelihood of child abuse and neglect will be reduced. Lund programs focus on building the following protective factors: parental resilience, social connections, knowledge of parenting and child development, concrete supports in times of need, and social emotional competence in children. Research shows that the promotion of these particular protective factors is a key intervention strategy that can improve social and emotional wellbeing in children.

Many of Lund's referrals come from our strong network of community partners, our long standing history in the community, word of mouth, and advertising. We are working to ensure that our website and materials are easily accessible, and represent the community Lund serves.

2. Program Funding:

a. Identify how Town funds, specifically, will be used (i.e., funds will provide "X" amount of units of service.) Town funds will go directly to support Lund's general operating costs, and will allow Lund to continue to provide critical services.

b. List the other agencies to whom you are submitting a request for funds for this program and the amount requested. How would this program be modified should revenues be lost?

While a majority of funding comes from state/federal grants and contracts, we also receive funding from the United Way of Northwestern Vermont, individual donors, foundations and corporations. If we were to lose funding for general operating, our ability to continue to offer high quality wraparound family services would be compromised, negatively impacting families seeking support.

B. ORGANIZATIONAL CAPACITY

1. Describe your agency's capability to provide the program including its history, previous experience providing this service, management structure and staff expertise.

Lund has a 132 year history of supporting children and families, first as a refuge and maternity home providing adoption services for unmarried mothers. Now, Lund provides wraparound and integrated services to support the entire family through adoption, residential and community treatment and family support services. Our staff are experts in their fields, with many staff in leadership roles having over a decade of experience. Lund is a valuable partner to the State of Vermont, and has formed partnerships across the state to help support families. Lund's leadership team helps inspire and lead staff while Lund's Board of Trustees brings their dedication, talent and expertise to ensure Lund's ongoing strength and success.

2. How will you assess whether/how program participants are better off? Describe how

you will assess program outcomes. Your description should include: what (what kind of data), how (method/tool for collecting the data), from whom (source of data) and when (timing of data collection).

To effect change in trends related to agency indicators and outcomes, we must first develop an understanding of our desired results. The anticipated results of Lund's work are to increase family strengthens, enhance child development and reduce the likelihood of child abuse and neglect. By implementing the Strengthening Families Framework across the agency, we will be able to measure our progress and see trends using consistent data across our programs. This will allow us to evaluate our services to ensure we are improving child safety and family wellbeing. Lund is working on a Protective Factors survey, designed for use with parents and caregivers, and will be sent out once a year (time of year to be determined). The survey results will provide Lund with a snapshot of the families we serve, measure changes in family protective factors and help staff identify areas where they can increase protective factors for each family.

3. Summarize or attach program and or service assessments conducted in the past two years.

As we work towards an agency wide assessment, please find the FY22 annual assessment for Lund's Regional Partnership Program attached. This is one of four Lund services utilized by Town residents.

4. Does your organization have a strategic plan and a strategic planning process in Place-No If yes, please attach your plan.

The strategic plan should include a mission statement, goals, steps to achieve the goals, and measures that assess the accomplishments of the goals.

5. What is the authorized size of your board of directors? 20

6. How many meetings were held by the board last year? 5

I, the undersigned, confirm the information contained herein is accurate and can be verified as such. I understand and agree that if the requested funds are approved, the disbursement of funds are subject to all conditions established by the Richmond Selectboard.

Signature of Applicant  Date 10/1/22

Sharon Lifschutz, Director of Development
Print Name of Applicant and Title



Regional Partnership Program FY22 Data and Program Review

Contents

Program Overview	2
RPP’s Response to COVID-19	3
FY22 RPP data:	4
FY22 Outcome Highlights:.....	5
Program Outcomes:	6
Overall SUD Assessment Completion and Treatment Engagement	6
District Overviews	8
Barre District	8
Bennington District	11
Brattleboro District	13
Burlington District	16
Hartford District	19
Middlebury District:	21
Morrisville District.....	24
Newport District.....	26
Rutland District:	29
Springfield District.....	31
St. Albans District:	33
St. Johnsbury District:	36

Program Overview:

The Lund Regional Partnership Program (RPP) is a collaboration between the Department of Children and Families (DCF) Family services Division, The Vermont Department of Health Alcohol and Drug Abuse Program (ADAP) and Lund. RPP is a voluntary program designed to improve the well-being of and permanency outcomes for children affected by parental substance misuse by increasing access and engagement of parents in treatment. RPP staff, collocated in DCF Family Services offices in each district, work in partnership on the front end of the child protection case screening for problematic substance use, linking parents to indicated treatment services and addressing barriers to successful engagement, both at the individual level, and across the system of care.

RPP Case Manager's provide the following services:

1. Screening for parental substance misuse using the UNCOPE screening tool and client interview; coordinate referrals for SUD assessment as indicated.
2. The Lund case manager addresses barriers to treatment engagement and/or services for each caregiver.
3. Make necessary referrals and support linkage to treatment and other services to foster successful treatment engagement. Work in collaboration with the FSD FSW to establish, determine and communicate treatment recommendations.
4. Provide consultation and information necessary to FSD in assessing child safety as it relates to parental substance use, and provide general consultation and education as appropriate to FSW's regarding addiction and treatment.
5. Work with the local system of care to identify gaps and address barriers to timely treatment access for parents involved with Family Services. RPP case managers also assist the two systems to better understand goals, policies and practices and how to effectively partner on behalf of families.
6. Gather data to routinely assess and report on effectiveness of the service, identify trends and family outcomes.

The Case Manager's average time working with clients is 2 to 3 months. During this time, they support clients to engage in treatment services that they may not have been able to successfully access independently. Additionally, clients who identify already being engaged in treatment are able to receive RPP services to assist FSD with confirming treatment engagement as well as receive case management support to address barriers that may be impacting effective engagement and creating increased risk for their child. Given the collaborative nature of this partnership, the case manager's work with parents is shared with FSD to aid in their safety assessment, case determination and planning. A case will end with RPP services once the case managers have confirmed the client's enrollment in the initial phase of treatment.

Lund Case Managers attend trainings throughout the year related to substance use. All case managers either hold an AAP or are working toward obtaining the AAP. While participation in Lund RPP is a voluntary, the overall rate of participants who agree to engage in services is high. The program has identified Motivational Interviewing as an effective engagement strategy. Therefore, as part of ongoing training, Lund has set a goal that all RPP case managers will be formally trained in Motivational Interviewing during FY23.

"Lund RPP has been instrumental in partnering me with a therapist who, after 20 years of seeking treatment, has been able to correctly diagnose my PTSD contributing to my almost life-long struggle with alcohol use. This has been a life-changing opportunity that I am eternally grateful for. While in therapy for only a few short months, I have been given the tools and am being shown the skills to make mind and life-altering improvements. I am looking forward to a very bright future with my sons and living my best life; for me and for them."

RPP's response to COVID-19 and shift back to in-person work in FY22

The program continued to provide RPP screening and case management to parents referred by FSD this year, with more of an emphasis placed on returning to in-person services. All RPP staff returned to their district offices at least half of the time and primarily are providing screenings and client care in-person. Some remote work has been supported throughout the past year when requested by RPP staff to continue to be responsive to the impacts of covid as well as to support flexible working options.

RPP case managers have continued to provide case management coverage to FSD Districts when there has been a Case Manager vacancy. All 12 districts have received coverage as needed, and at times multiple case managers and supervisors have provided coverage to one district. Case management coverage has primarily been virtual with phone or video screenings. However, more recently, Lund has supported RPP staff in traveling on site to provide in-person coverage on an as needed basis. This has allowed for more rapport building between FSWs and covering Case Managers. Lund has also implemented a triage plan this fiscal year, which will be implemented as needed in times when case managers are experiencing high caseloads. This triage plan has been shared with FSD and RPP case managers and will be used in FY23, if needed.

Treatment programs began offering services via telehealth during the pandemic, which expanded resources for clients. This continues to be a benefit for clients who experience transportation barriers. Many providers have also shifted to providing a hybrid of in-person and telehealth services, expanding opportunities for clients.

RPP staff have continued to utilize case management tools and approaches that have improved their ability to engage clients. This includes the use of PandaDoc which Lund purchased to facilitate electronic signatures on forms. This has significantly expedited our ability to obtain client authorizations and increased timely coordination of care with other providers.

While the overall number of screenings was lower this fiscal year, the percentage of clients who agreed to screening was higher. Case Managers have reported working with clients with significantly more acute needs than in the past, requiring more time and support from the CM than we have typically seen. Case managers have also reported experiencing reduced access to treatment services due to staffing shortages across providers statewide, increased wait times for treatment, and barriers related to Covid. Case managers are experiencing increased delays in hearing back from providers in general and for some providers a 1-2 month wait for an assessment, which does not meet the needs of the population RPP serves. While caseloads have been slightly lower this year, these additional factors contribute to overall higher needs on cases.

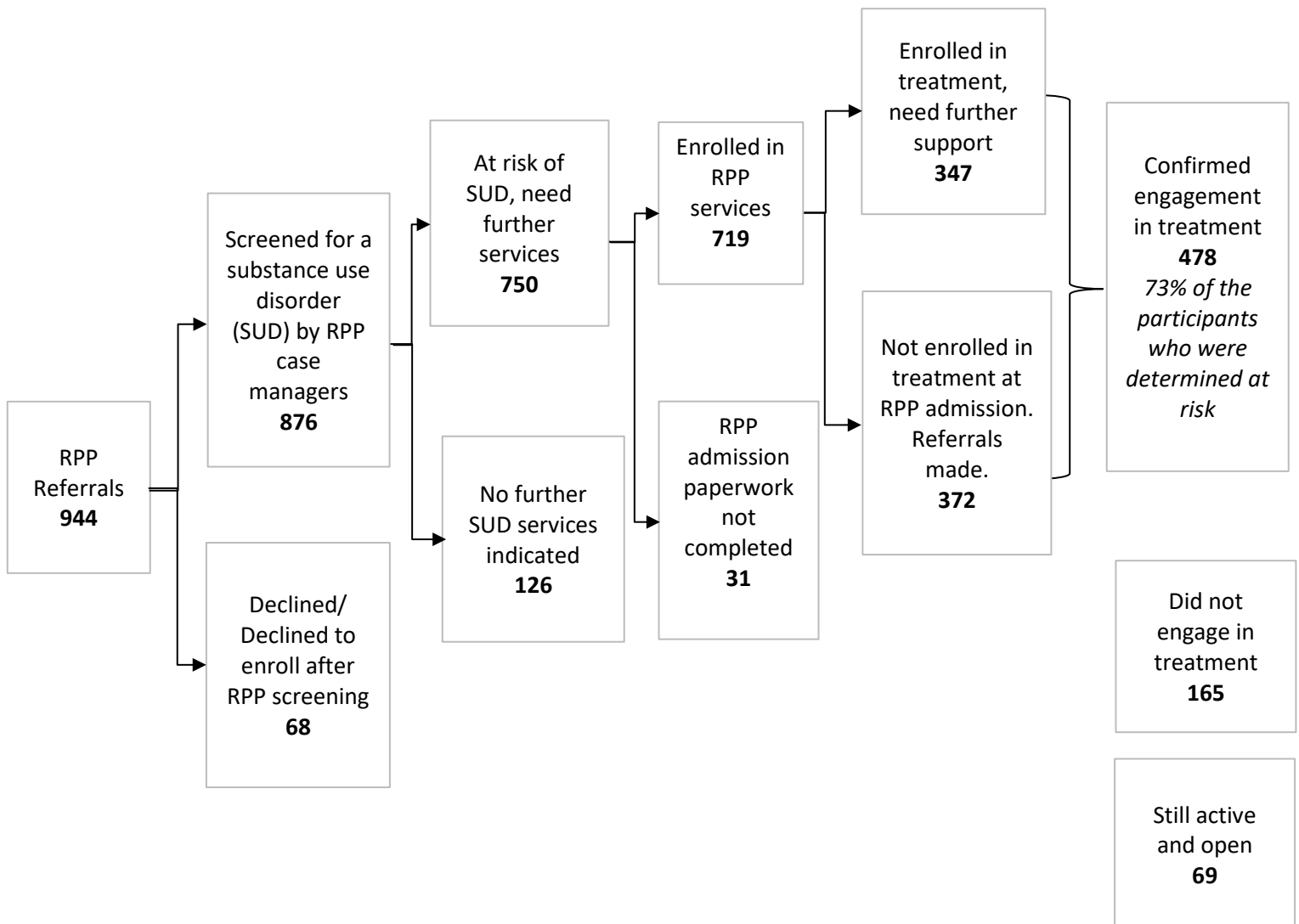
It is important to note that in our annual data review, we have observed decreased engagement and completion rates for districts when a remote coverage plan was in place. While this strategy helps to provide support to families/DCF when there is a vacancy, it is clear from our data that in-person responses lead to better overall outcomes. Districts with overall lower completion rates both in RPP case management and assessment completion were all districts that experienced vacancies this FY and had remote coverage, bringing down the overall state averages. An example of this is in Middlebury which had a 53% completion rate, partially due to the disruption of case managers during the year and remote coverage. This will continue to be a strategy the program utilizes, when necessary, as the outcomes are still better than periods of no coverage at all, however it is important to highlight the difference and that the data indicates optimal outcomes with in-person responses.

FY22 RPP data:

In FY22 the Regional Partnership Program (RPP), provided services across the state in all 12 DCF district offices. The RPP case managers offered an SUD screening to **944** parents and caregivers and provided ongoing RPP case management services to **719** parents and caregivers. **31** Clients completed their screening via telehealth but did not return electronic admission paperwork during times of fully remote work, when in person contact was restricted, or did not respond to case manager's attempts to schedule in-person meetings. The program tracks each districts referrals, services provided, assessment completion, and program completion rates. This year, the program began separating the data for clients who completed SUD assessments and differentiating outcomes between clients who had treatment recommendations and those who did not.

*At the time of this reporting period **69** clients were still active and their outcomes are not reflected in this chart.

*Clients who moved out of state, were incarcerated, or who passed away during RPP involvement are not included in the overall RPP completion rate



FY22 Outcome Highlights:

- **93% of parents offered RPP screening and services engaged in the screening, a slight increase from FY21 (91%)**
- **86% of parents screened were determined to be at risk of SUD and requiring additional services**
- **70% of participants who were recommended for an assessment, completed their assessment**
- **85% of participants overall who completed an assessment, successfully completed RPP**

This year, Lund began to differentiate outcomes between participants who completed a substance use assessment and whether or not they had treatment recommendations. Of the individuals who completed an assessment and had recommendations for further treatment, 82% successfully completed RPP services (statewide average).

Beginning in FY21, Lund began to track a new data set to look at outcomes for clients referred to RPP who were already engaged in treatment at the time of referral and for those who were not in treatment at the time of referral. For FY 22 statewide, this data set indicated:

- **47% of referred participants enrolled in RPP were already engaged in treatment and required additional case management services to address barriers and increase treatment engagement.**

**This is slightly lower than FY21 when 53% of participants were in treatment at admission.*

Quotes from the participants of RPP

"You made me feel super comfortable."

"I am so grateful for you. I never have felt better. Thank you for sticking by my side and believing in me when I could not believe in myself. You are the best worker I have ever had and I am sad to see you have to close my case"

"Thank you"

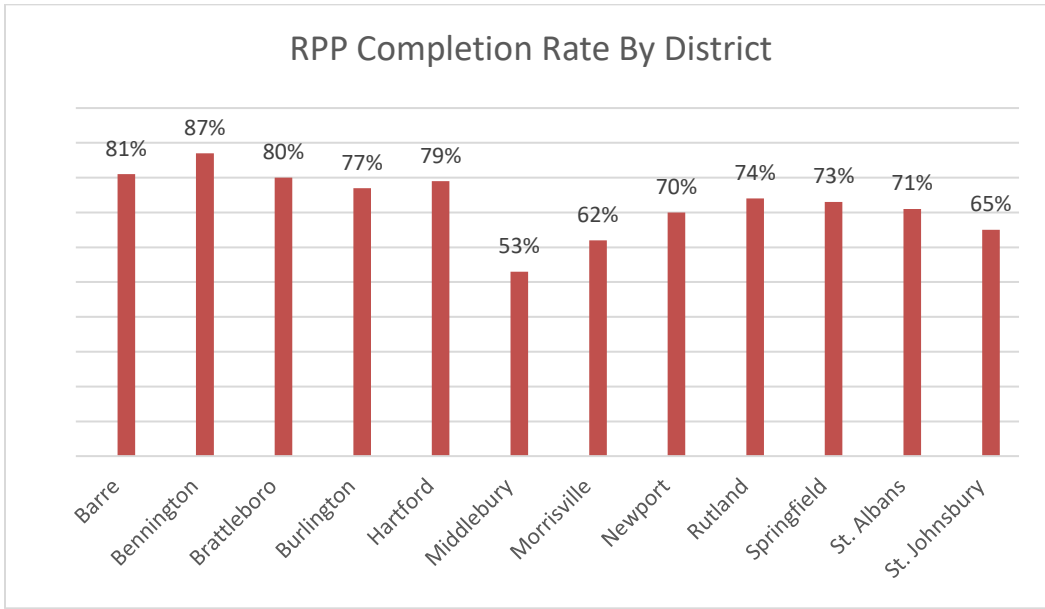
"I am so very grateful. This is going to be life changing"

"I finally feel good about things"

"I am glad everything worked out and I appreciate all the help you have given me. Thanks again!"

Program Outcomes:

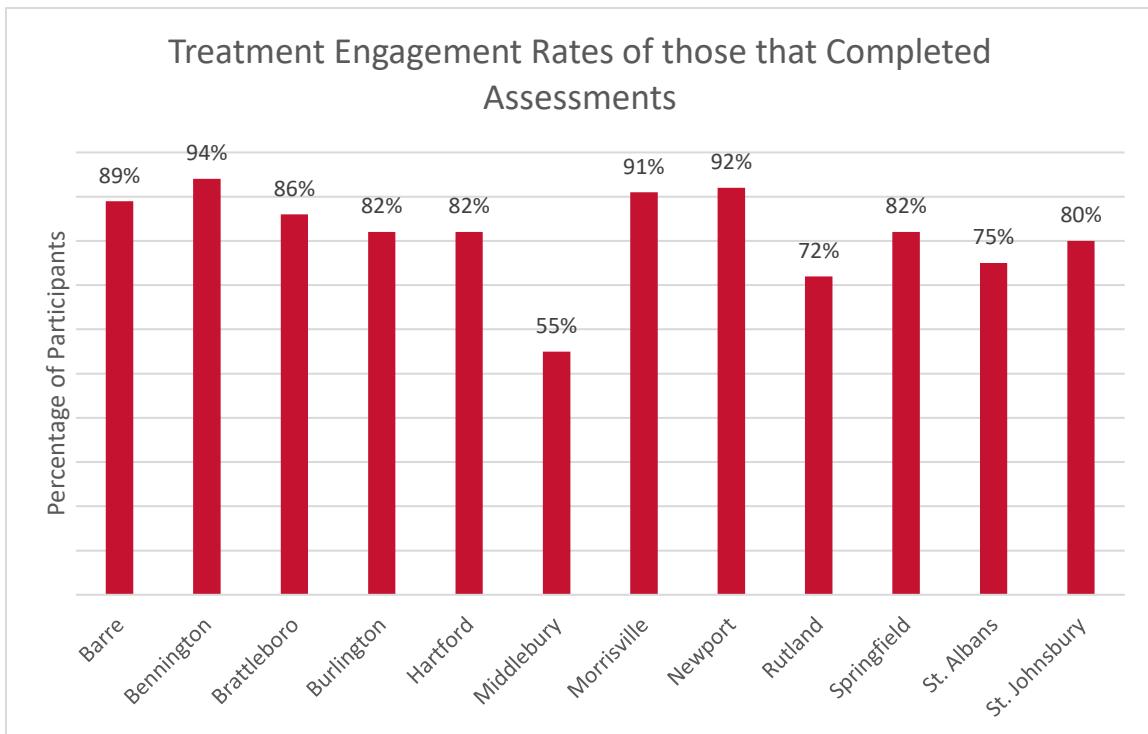
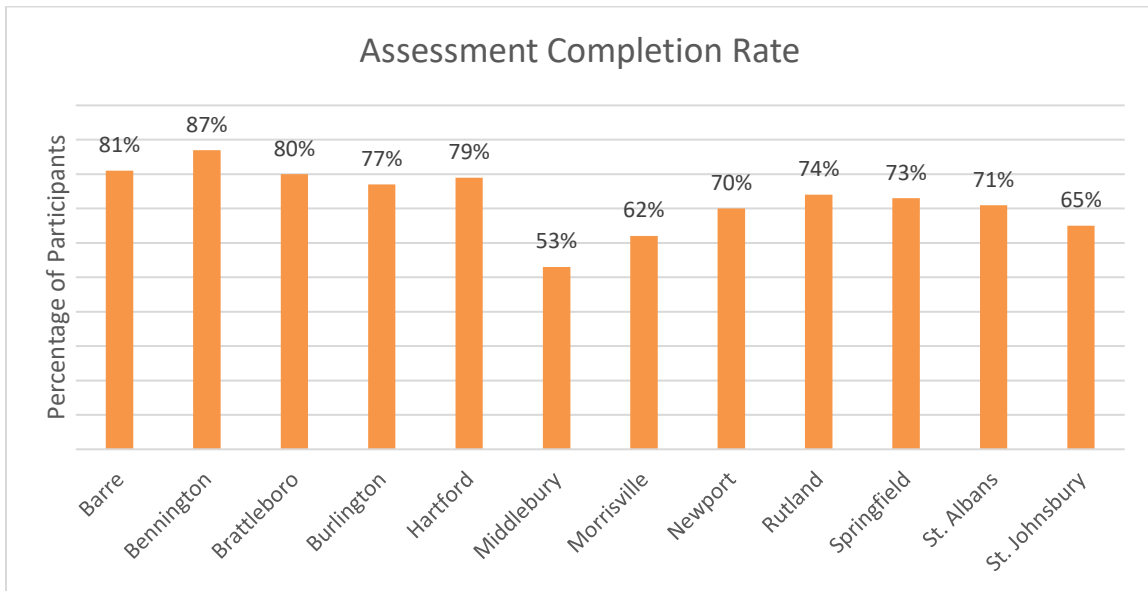
RPP is designed to improve the well-being of and permanency outcomes for children affected by parental substance use by increasing access and engagement of parents in treatment. Therefore, the outcomes that the program measures are: RPP engagement rate, RPP services completion rate, SUD assessment engagement, and Treatment engagement.



Overall SUD Assessment Completion and Treatment Engagement:

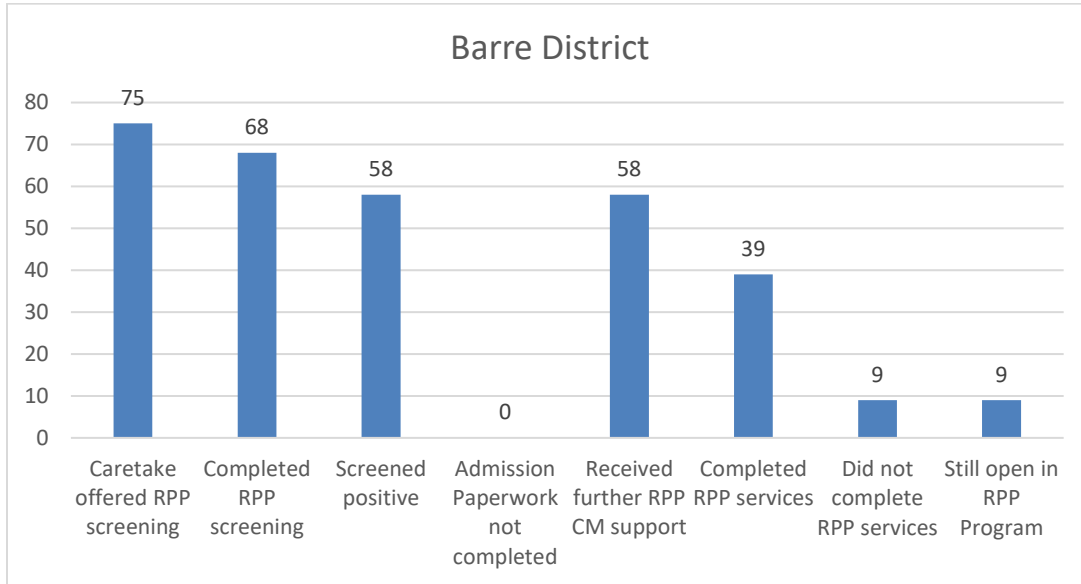
418 RPP clients who screened positive indicated a need for further assessment, an 10% increase from FY21. Of this, **284** successfully completed their assessment. (**29** clients were still active and pending assessment at the time of this report). This indicates a **70%** follow through rate statewide.

Additionally, **85 %** of the clients who completed an assessment went on to complete the RPP Program by successfully engaging in the treatment recommended to meet their needs or they did not present with a need for further substance use treatment.



District Overviews

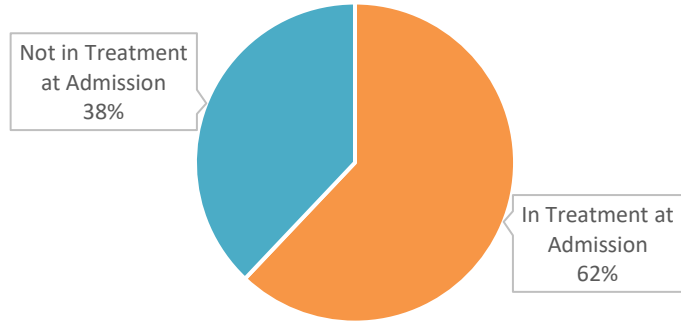
Barre District:



- In the Barre District Office, **75** caretakers were offered an SUD screening and **91%** of caretakers who were offered a screening, engaged in and completed the screening.
- **85%** of those screened had an indicated need for further assessment and RPP services. Subsequently, **58** clients received further RPP case management services to support their engagement in assessment and treatment
- **81%** of parents with a positive screening who were in need of further services successfully completed the program
- **89%** of participants who had a treatment recommendation after assessment, went on to successfully complete RPP by engaging in treatment.

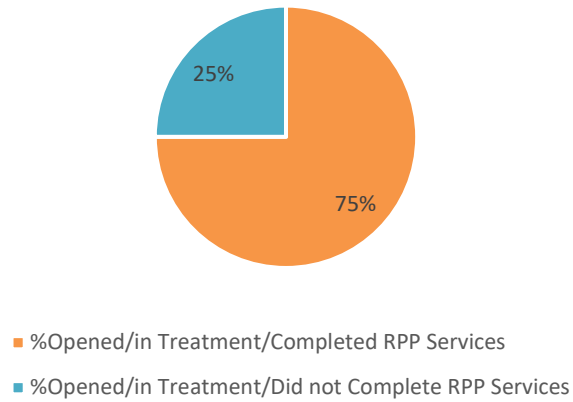
1 client died during RPP involvement and was not factored into the completion rate

% of RPP Clients In Treatment at Case Open in Barre

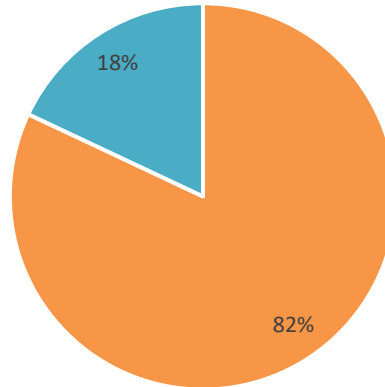


In Barre, **36** clients were in treatment at RPP admission and **22** were not in treatment at RPP admission.

% of clients in Treatment at Admission who Completed RPP Services In Barre



% of Clients who were not in Treatment at Admission
and Completed RPP Services in Barre

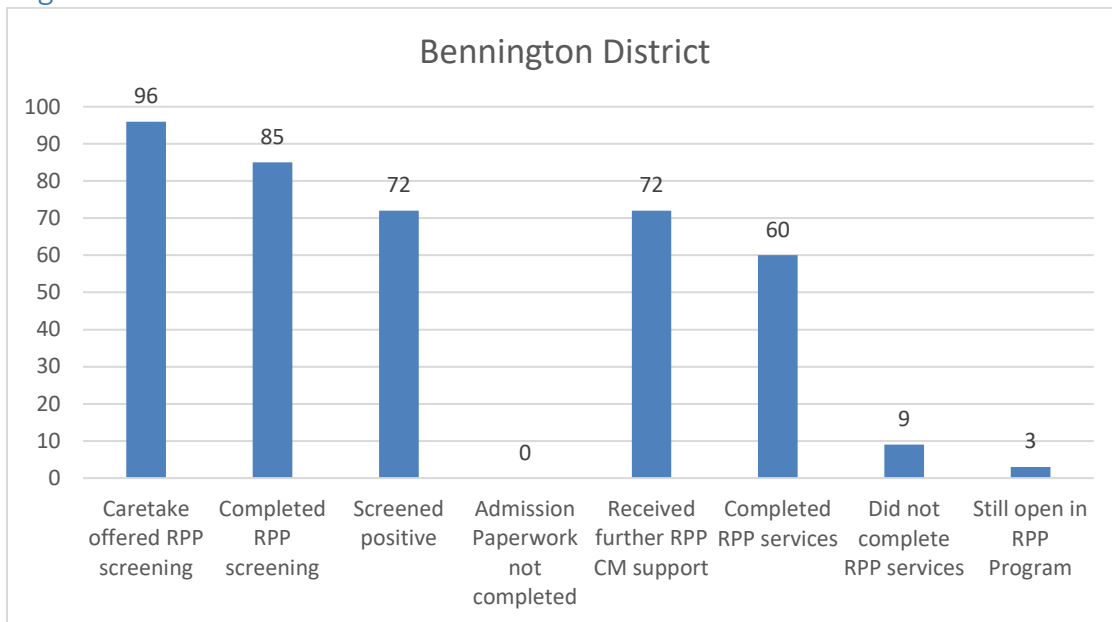


- % Opened/Not in Treatment/Treatment Recommendations Made/Completed Services
- % Opened/Not in Treatment/Treatment Recommendations Made/Did not Complete Services

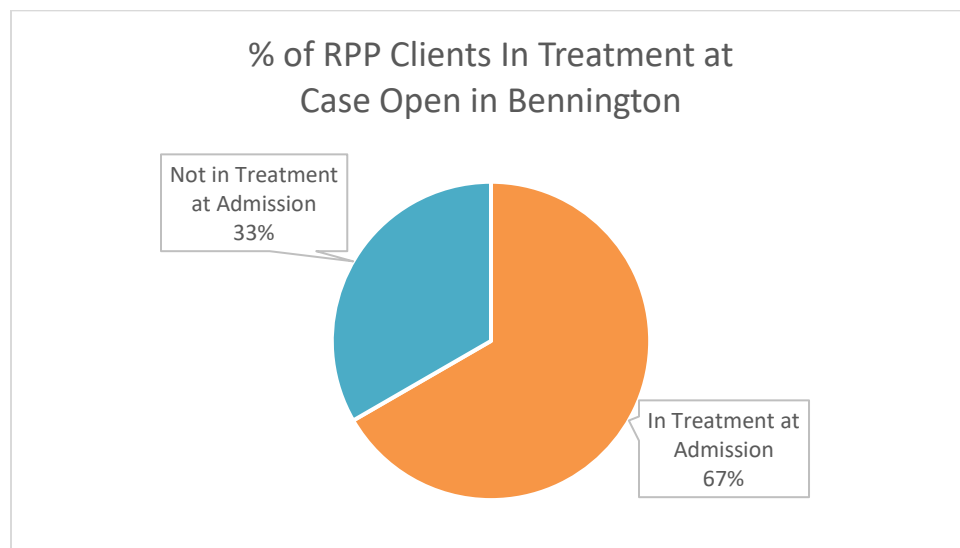
“The coming together of community providers to rally with all the turnover and struggles this past year as we move from a completely shut down world to a hybrid mix. I've been able to connect clients with a wider variety of supports with increased telehealth options. From a client standpoint, I have a mom who is now 6 months sober and, on the verge of getting unsupervised visits when she was in active, daily use when we first met!”.

-RPP case manager

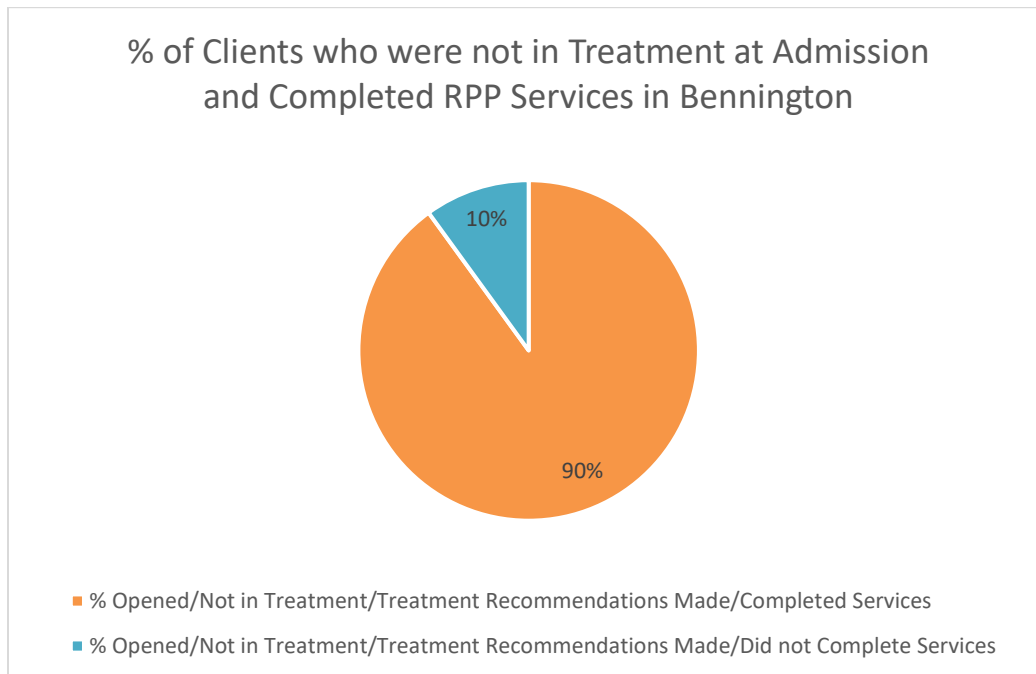
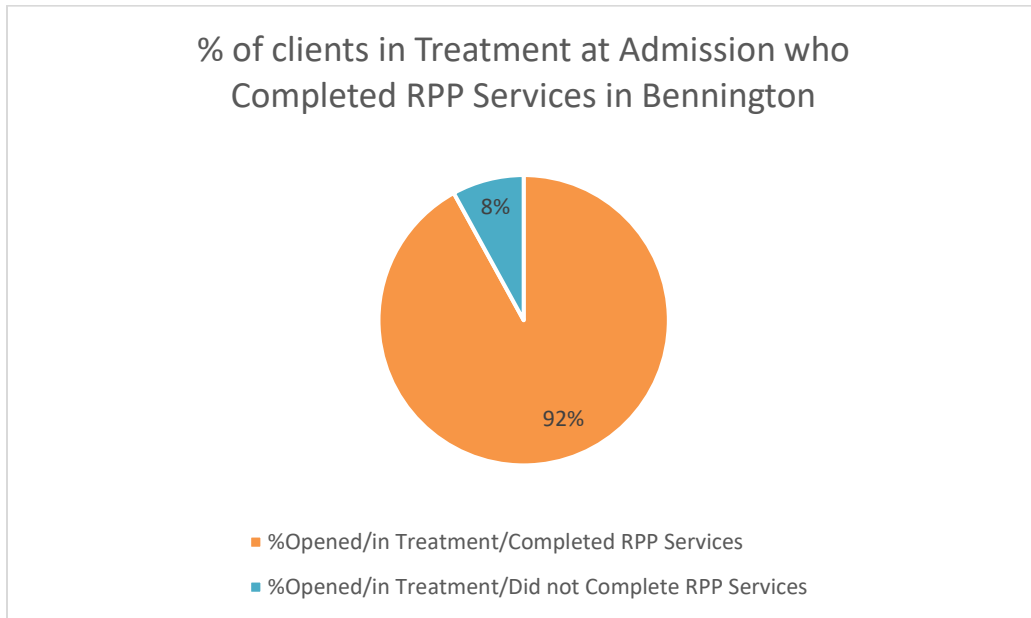
Bennington District:



- In the Bennington District Office, **96** caretakers were offered an SUD screening and **89%** of caretakers who were offered a screening, engaged in and completed the screening.
- **85%** of those screened had an indicated need for further assessment and RPP services. Subsequently, **72** clients received further RPP case management services to support their engagement in assessment and treatment
- **87%** of parents with a positive screening who were in need of further services successfully completed the program, an increase from FY21
- **94%** of parents who had a treatment recommendation after assessment, went on to engage in the recommended treatment

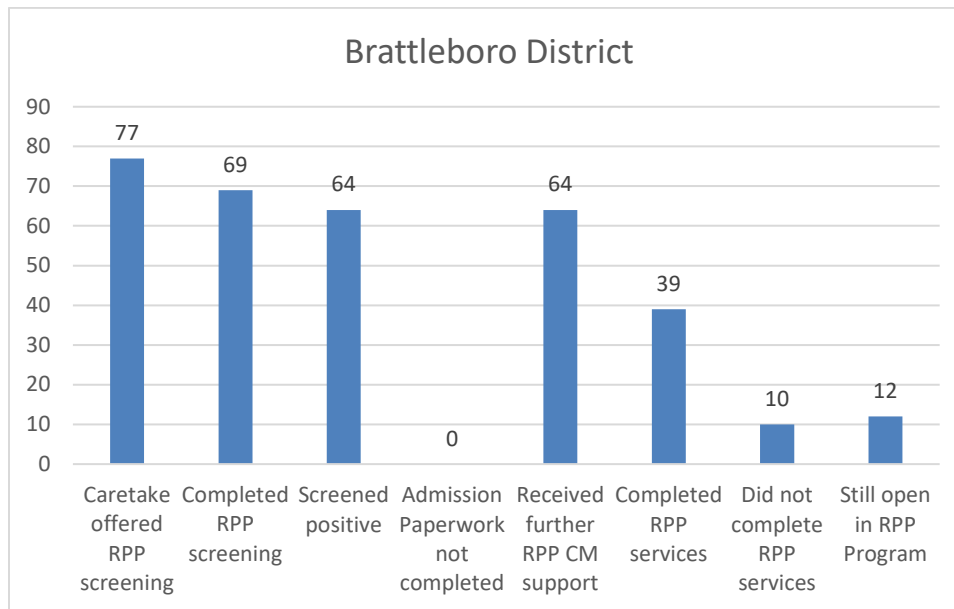


In Bennington, **48** clients were in treatment at RPP admission and **24** were not in treatment at RPP admission.



“I worked with a client who was at “rock bottom”. I was able to get her into residential treatment, followed by an extended stay at a sober living house. I listened to my client daily, just listened and gave her the respect she deserved. She also went on to confront the domestic violence in her life and is moving forward with a positive, abstinent lifestyle. I felt like I was the only “anchor” this client had during this extremely difficult time period for her.” – RPP Case manager

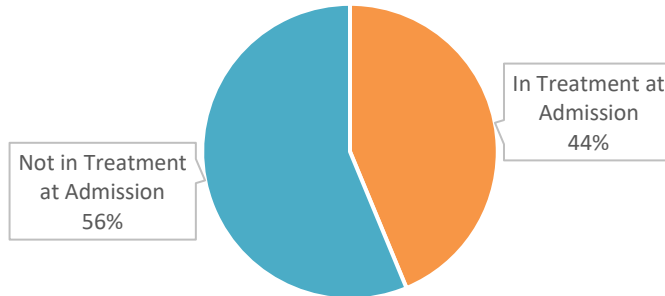
Brattleboro District:



- In the Brattleboro District Office, **77** caretakers were offered an SUD screening and **90%** of caretakers who were offered a screening, engaged in and completed the screening.
- **93%** of those screened had an indicated need for further assessment and RPP services. Subsequently, **64** clients received further RPP case management services to support their engagement in assessment and treatment
- **80%** of parents with a positive screening who were in need of further services successfully completed the program by engaging in treatment.
- **82%** of parents who had a treatment recommendation after assessment, went on to engage in the recommended treatment

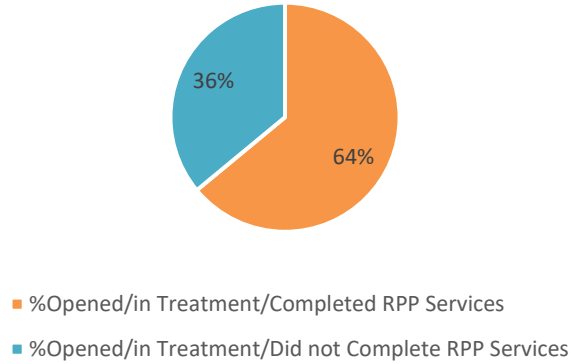
3 clients moved out of state during the course of RPP and their data was not factored into the completion rate

% of RPP Clients In Treatment at Case Open in Brattleboro

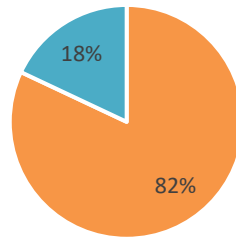


In Brattleboro, **28** clients were in treatment at RPP admission and **36** were not in treatment at RPP admission.

% of clients in Treatment at Admission who Completed RPP Services in Brattleboro



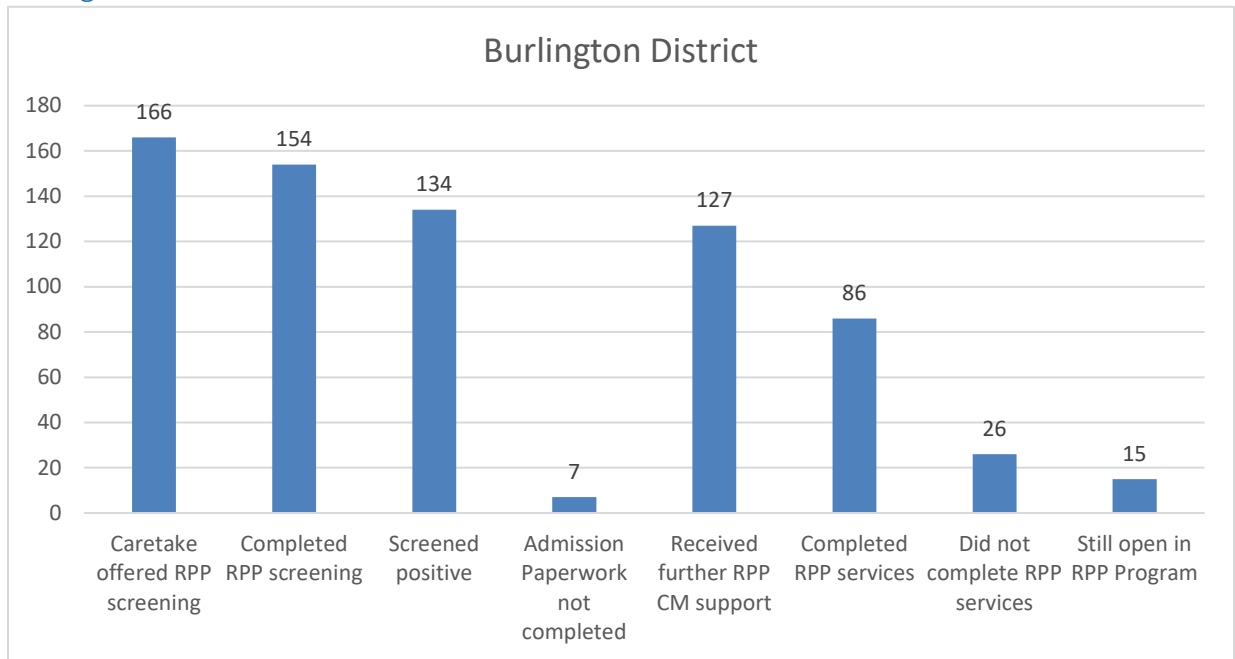
% of Clients who were not in Treatment at Admission and Completed RPP Services in Brattleboro



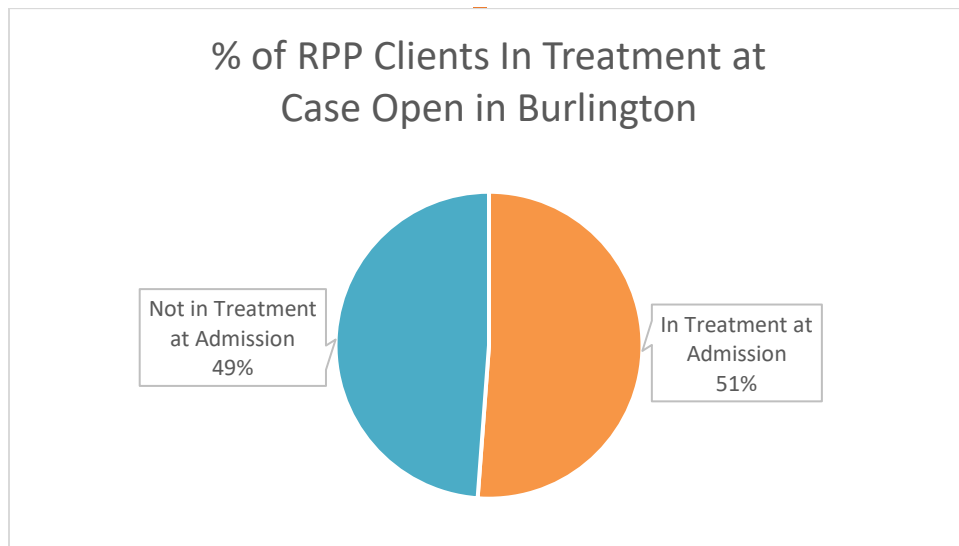
- % Opened/Not in Treatment/Treatment Recommendations Made/Completed Services
- % Opened/Not in Treatment/Treatment Recommendations Made/Did not Complete Services

“Client was unable to get suboxone. Prescribed high doses from provider and pharmacy did not have capacity to fill. Client had gone to hospital too and been denied Rapid Access. This case manager and FSW went to client’s home. This case manager called providers and several pharmacies to get client medication and was finally able to get her a few doses at no cost. This case manager called a local provider and got client in the following day for an assessment. Provider got her rapid access to psychiatry and therapy. During the time working with client, she left abusive partner and is engaged fully in treatment” .
– RPP Case manager

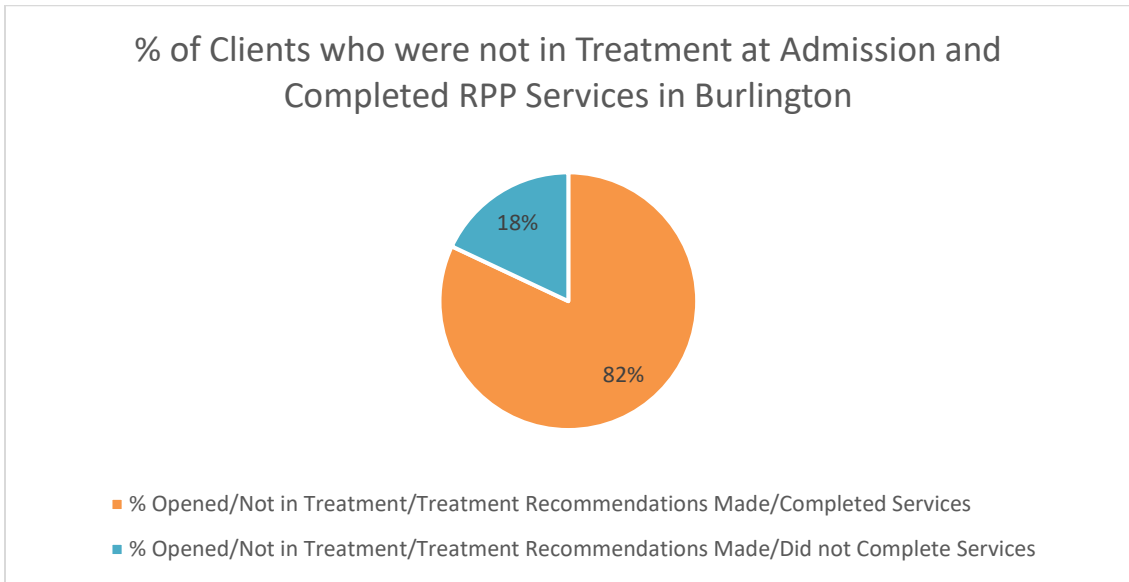
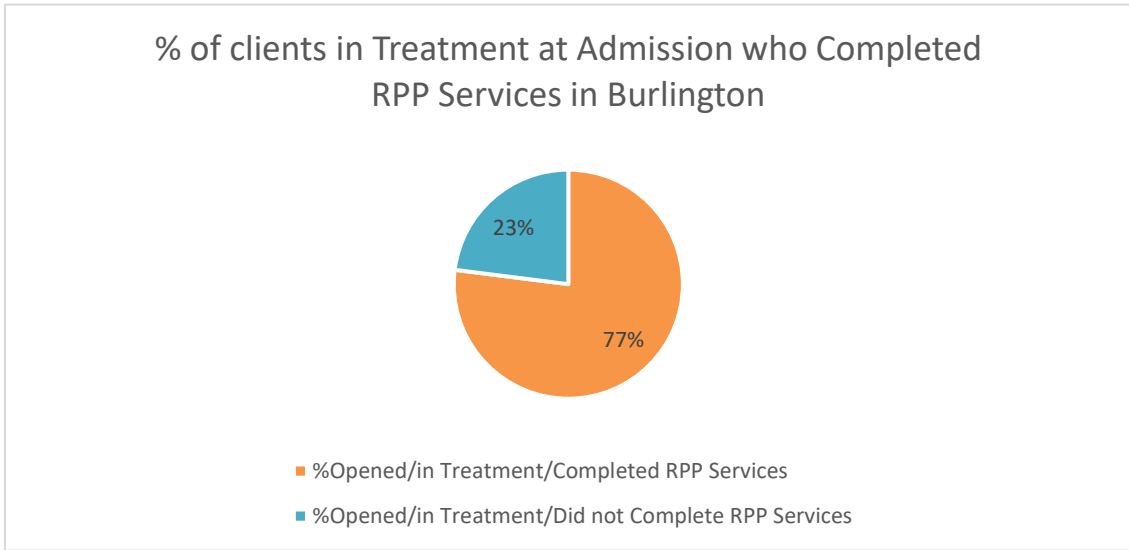
Burlington District:



- In the Burlington District Office, **166** caretakers were offered an SUD screening and **93%** of caretakers who were offered a screening, engaged in and completed the screening.
- **87%** of those screened had an indicated need for further assessment and RPP services. Subsequently, **127** clients received further RPP case management services to support their engagement in assessment and treatment.
- **77%** of parents with a positive screening who were in need of further services successfully completed the program by engaging in treatment.
- **82%** of parents who had a treatment recommendation after assessment, went on to engage in the recommended treatment

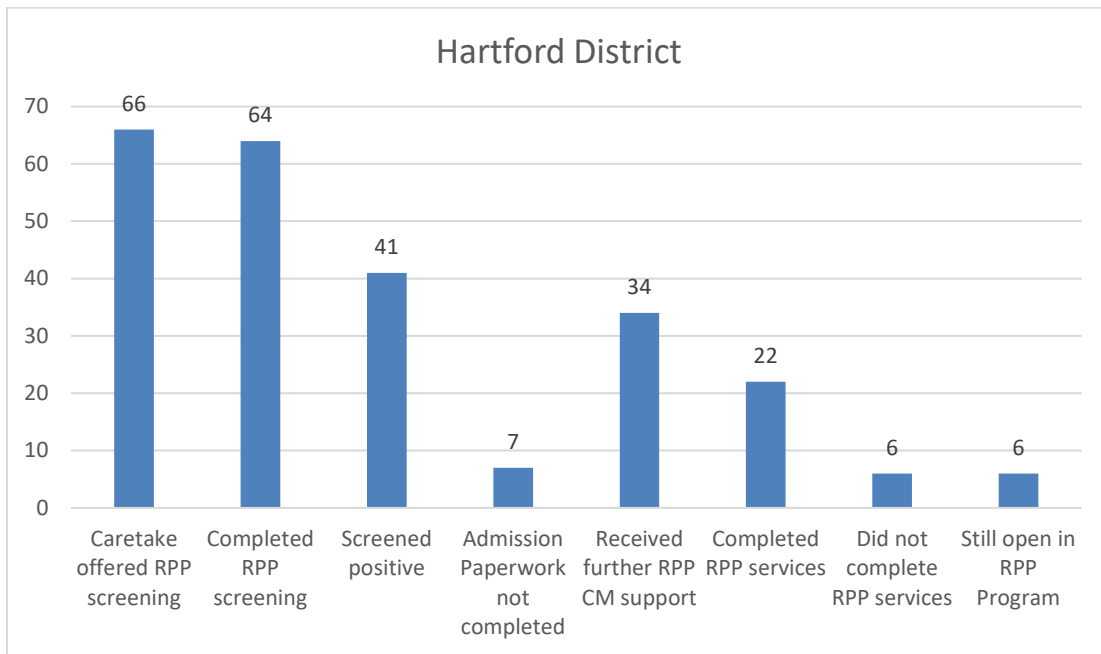


In Burlington, **65** clients were in treatment at RPP admission and **62** were not in treatment at RPP admission.

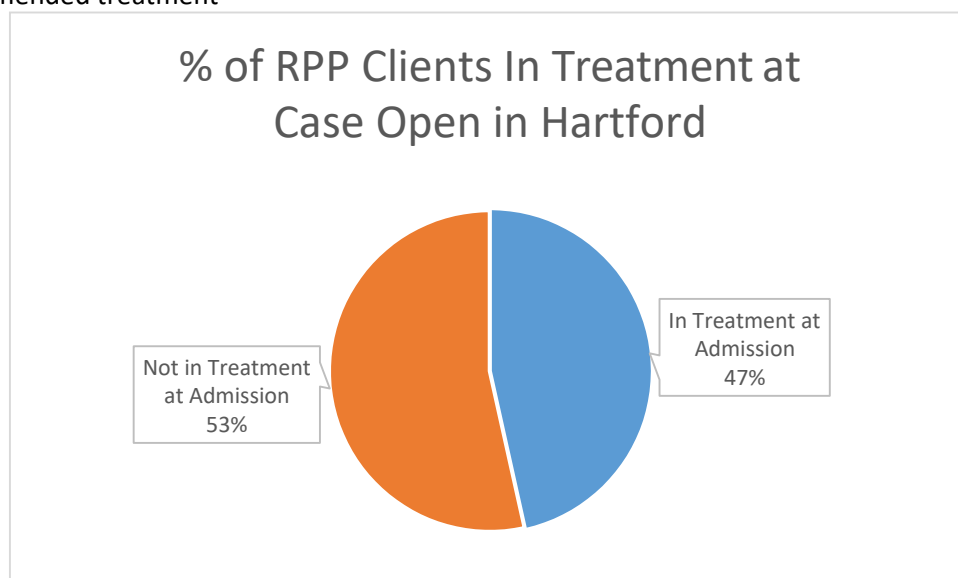


“When I had previously worked with my client, he did not engage in treatment during our work together. During the second Lund RPP encounter, he took advantage of the relationship I had built with the provider in the community to expedite a referral and quickly enrolled in IOP (3 times/weekly). He did not miss an IOP meeting, during the 3 weeks I was involved. He was happy and pleased with himself that he is doing the work and thanked me profusely for getting him connected with treatment so fast.”
- RPP Case Manager

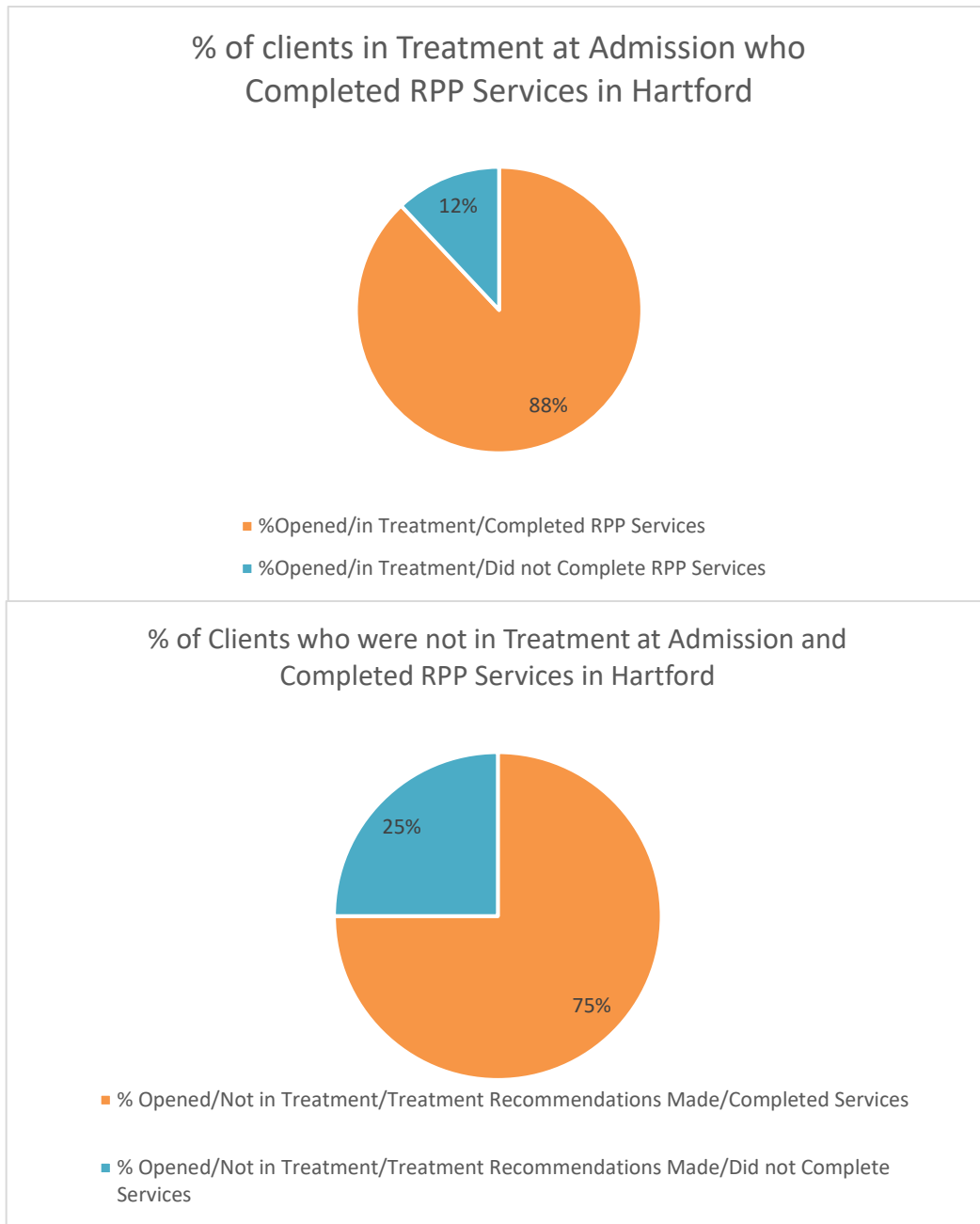
Hartford District:



- In the Hartford District Office, **66** caretakers were offered an SUD screening and **97%** of caretakers who were offered a screening, engaged in and completed the screening.
- **64%** of those screened had an indicated need for further assessment and RPP services. Subsequently, **34** clients received further RPP case management services to support their engagement in assessment and treatment.
- **73%** of parents with a positive screening who were in need of further services successfully completed the program by engaging in treatment.
- **75%** of parents who had a treatment recommendation after assessment, went on to engage in the recommended treatment



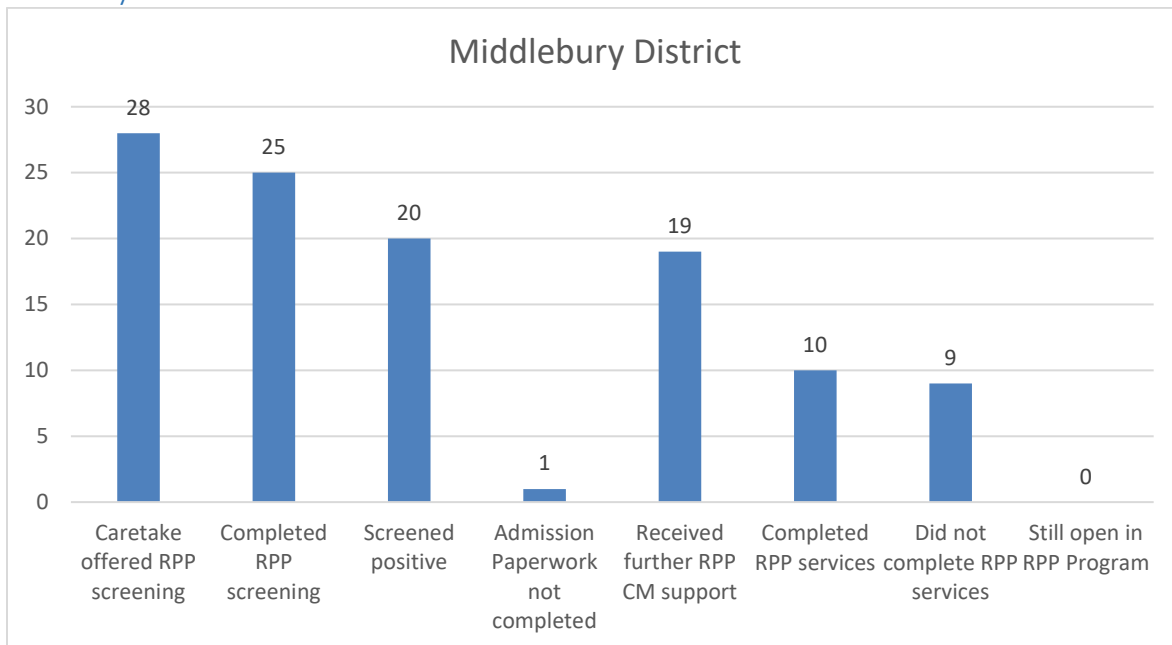
In Hartford, **16** clients were in treatment at RPP admission and **18** were not in treatment at RPP admission.



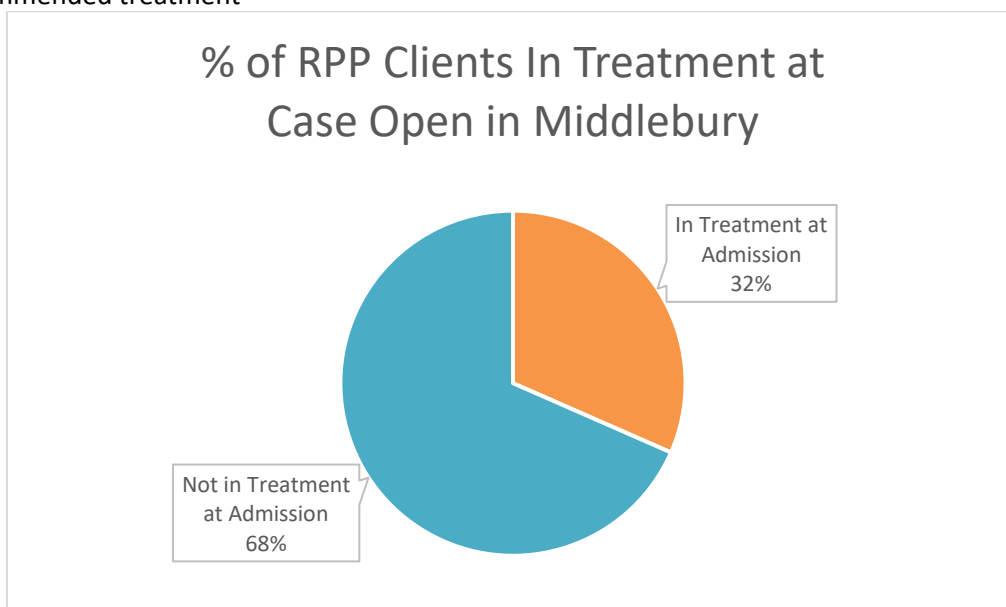
“I would be happy to share a bit about my interaction with a provider. I had the pleasure of speaking with the Center Administrator for a local treatment agency. She and I have exchanged a few emails back and forth in which we have been able to introduce ourselves and have made a plan to connect over phone or video call next week to speak more in-depth about the services that this program can provide for current and future RPP participants. This, paired with a number of smaller interactions I have been able to have with local providers have been great experiences, and I have found that it makes connecting clients with providers in-the-moment much easier to facilitate. From my first day working with Lund, I have been told that sometimes connecting with local providers can be one of the most challenging aspects of the work, and interactions such as the ones I have been able to have with this specific provider have greatly informed me about the value of reaching out to our providers and has made these future connections and interactions come by much easier.”

- RPP Case manager

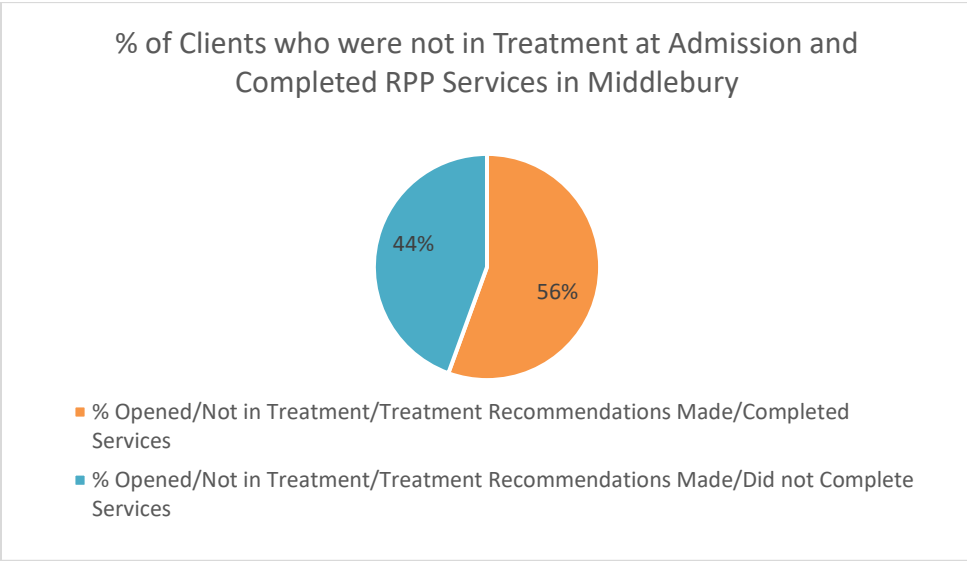
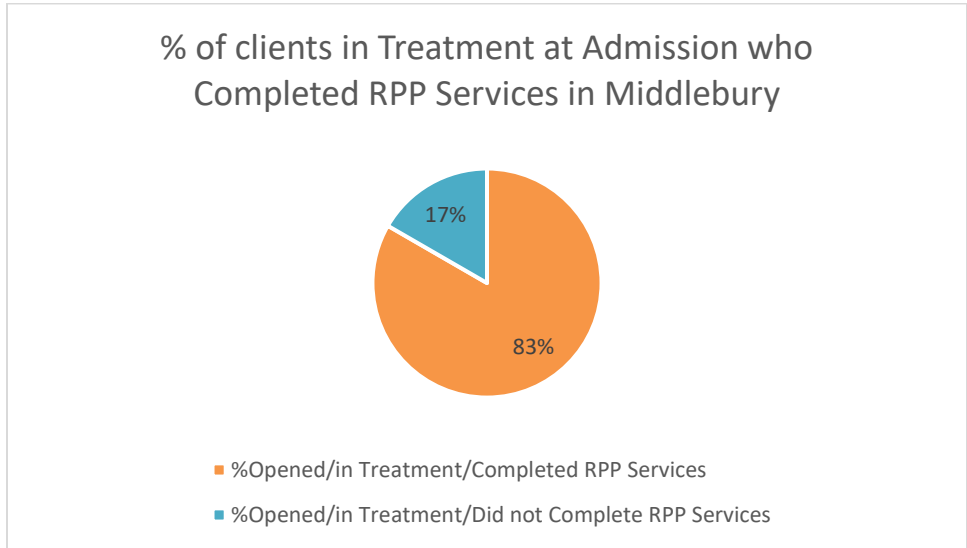
Middlebury District:



- In the Middlebury District Office, **28** caretakers were offered an SUD screening and **89%** of caretakers who were offered a screening, engaged in and completed the screening.
- **80%** of those screened had an indicated need for further assessment and RPP services. Subsequently, **19** clients received further RPP case management services to support their engagement in assessment and treatment
- **53%** of parents with a positive screening who were in need of further services successfully completed the program by engaging in treatment.
- **55%** of parents who had a treatment recommendation after assessment, went on to engage in the recommended treatment



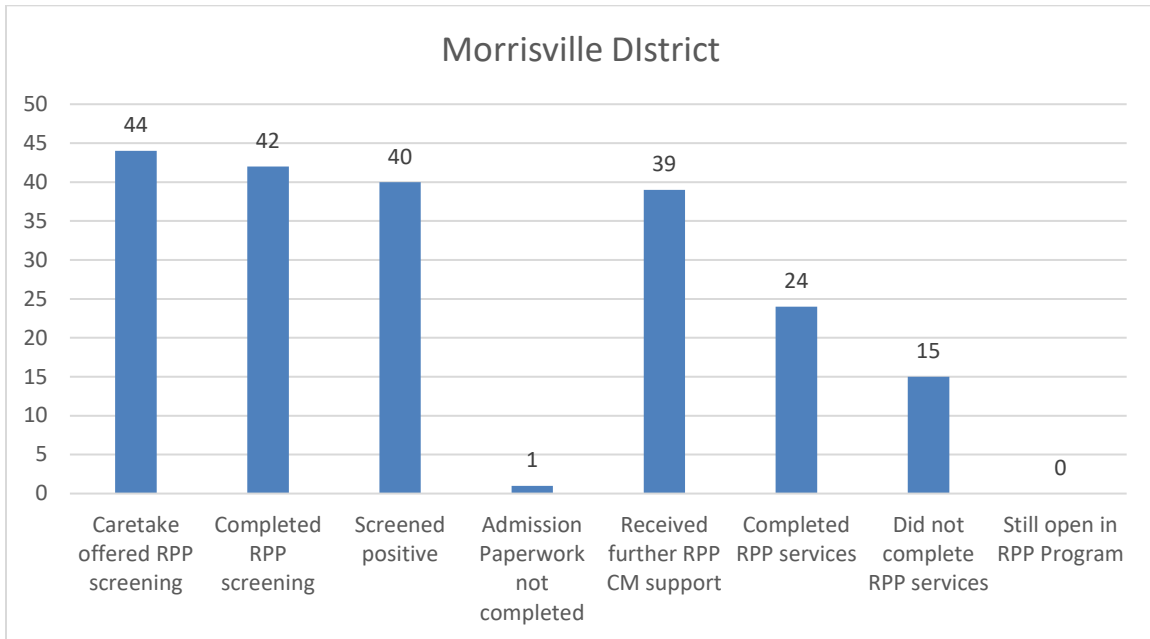
In Middlebury, **6** clients were in treatment at RPP admission and **13** were not in treatment at RPP admission.



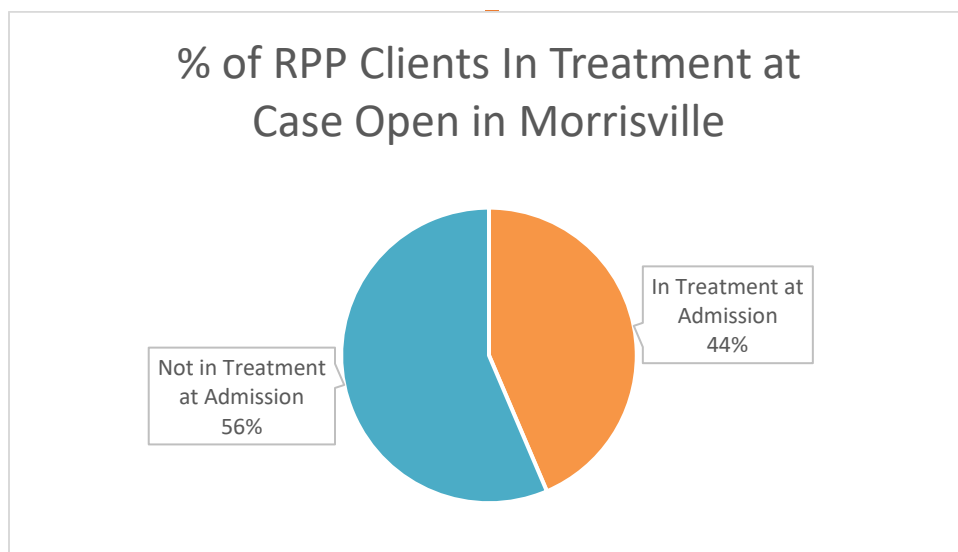
“Rebuilding a relationship with one of my local providers has been beneficial for not only our clients but DCF as well. The DCF intake supervisor and myself had a meeting with this program early on in my time here and ironed out a process where we can call with a client and they can give verbal permission to this program and bypass the process of waiting until the client attends their next appointment to sign ROI in person. DCF and myself also had a similar meeting with another provider in my community. After our meet and greet we ironed out the same process with this program and also received a staff sheet with names, emails and extensions for staff as well.”

–RPP Case Manager

Morrisville District:

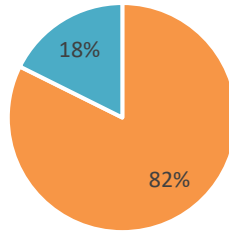


- In the Morrisville District Office, **44** caretakers were offered an SUD screening and **95%** of caretakers who were offered a screening, engaged in and completed the screening.
- **95%** of those screened had an indicated need for further assessment and RPP services. Subsequently, **39** clients received further RPP case management services to support their engagement in assessment and treatment
- **62%** of parents with a positive screening who were in need of further services successfully completed the program by engaging in treatment.
- **91%** of parents who had a treatment recommendation after assessment, went on to engage in the recommended treatment



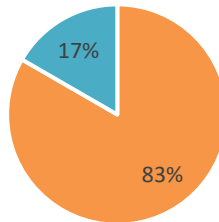
In Morrisville, **17** clients were in treatment at RPP admission and **22** were not in treatment at RPP admission.

% of clients in Treatment at Admission who Completed RPP Services in Morrisville



- % Opened/in Treatment/Completed RPP Services
- % Opened/in Treatment/Did not Complete RPP Services

% of Clients who were not in Treatment at Admission and Completed RPP Services in Morrisville

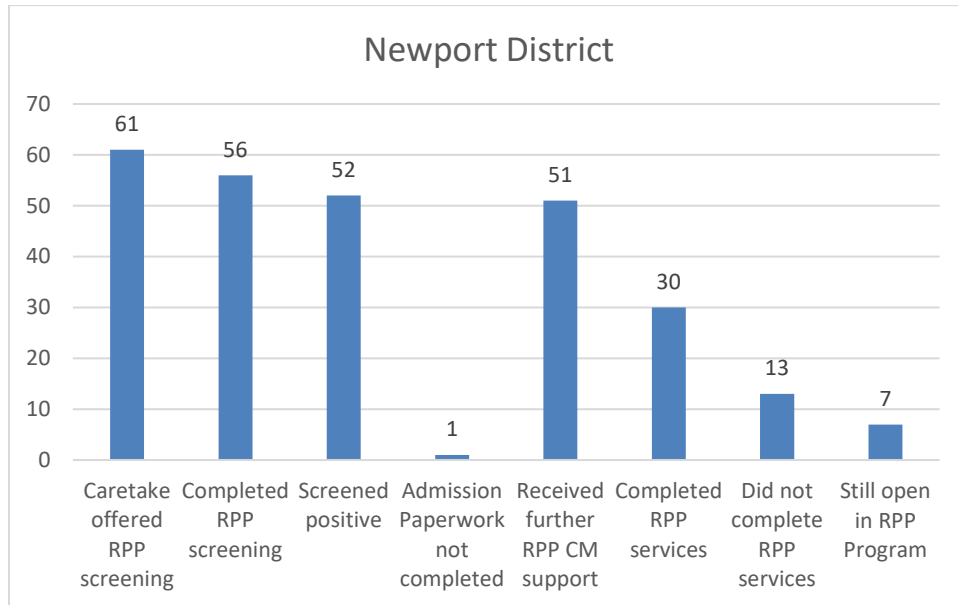


- % Opened/Not in Treatment/Treatment Recommendations Made/Completed Services
- % Opened/Not in Treatment/Treatment Recommendations Made/Did not Complete Services

“I worked with a client who had repeated DCF involvement due to substance misuse since 2015. Each previous time she was not able or willing to follow through with recommendations, but this time I was able to plant the seed and she agreed to start some basic counseling. When there was repeat opening of the case this year, I worked with her again and she was ready this time- she is currently in an IOP and MAT program for the first time. I am very proud of this because I was told she wouldn't likely wouldn't work with me or follow recommendations.”

– RPP Case manager

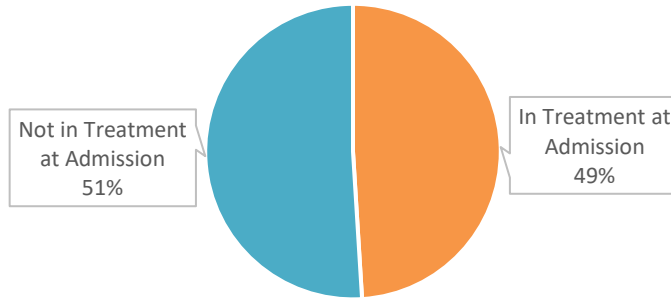
Newport District:



- In the Newport District Office, **61** caretakers were offered an SUD screening and **92%** of caretakers who were offered a screening, engaged in and completed the screening.
- **93%** of those screened had an indicated need for further assessment and RPP services. Subsequently, **51** clients received further RPP case management services to support their engagement in assessment and treatment.
- **70%** of parents with a positive screening who were in need of further services successfully completed the program by engaging in treatment.
- **92%** of parents who had a treatment recommendation after assessment, went on to engage in the recommended treatment

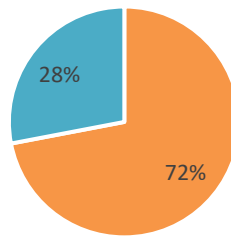
1 client moved out of state during the course of RPP and their data was not factored into the completion rate

% of RPP Clients In Treatment at Case Open in Newport



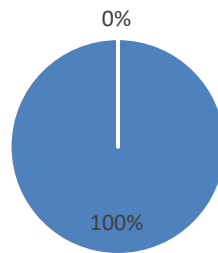
In Newport, **25** clients were in treatment at RPP admission and **26** were not in treatment at RPP admission.

% of clients in Treatment at Admission who Completed RPP Services in Newport



- %Opened/in Treatment/Completed RPP Services
- %Opened/in Treatment/Did not Complete RPP Services

% of Clients who were not in Treatment at Admission and Completed RPP Services in Newport



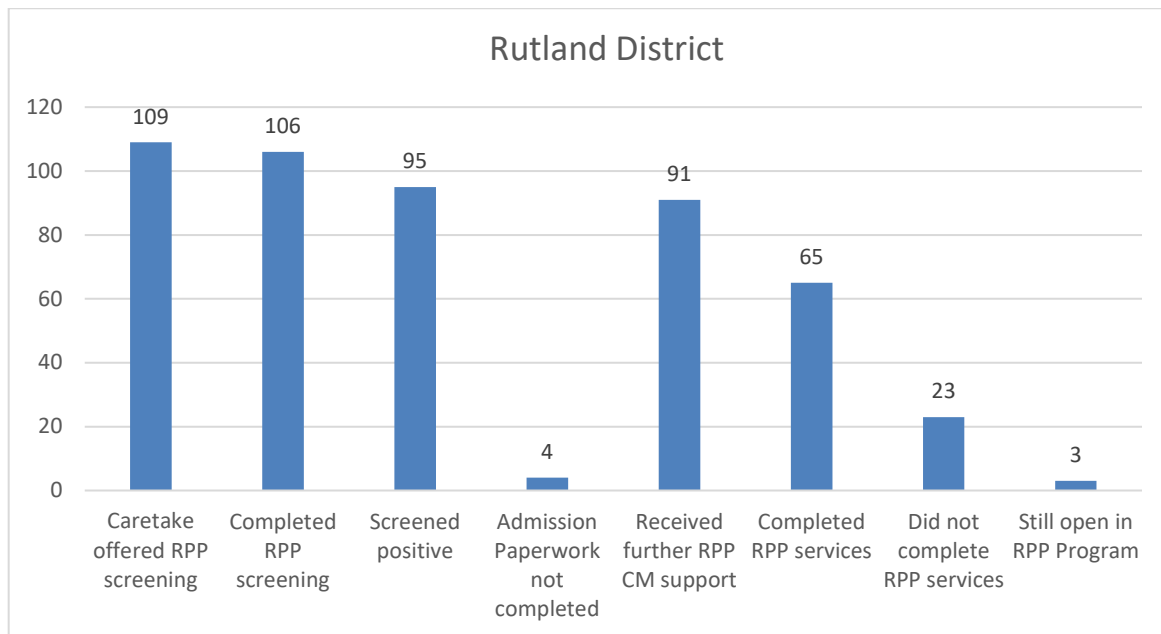
- % Opened/Not in Treatment/Treatment Recommendations Made/Completed Services
- % Opened/Not in Treatment/Treatment Recommendations Made/Did not Complete Services

“I worked with a client who had been challenging for DCF to engage. I was able to work with her to get her in with a provider for an assessment and ongoing counseling and she’s considering becoming a recovery coach, very happy with her supports.

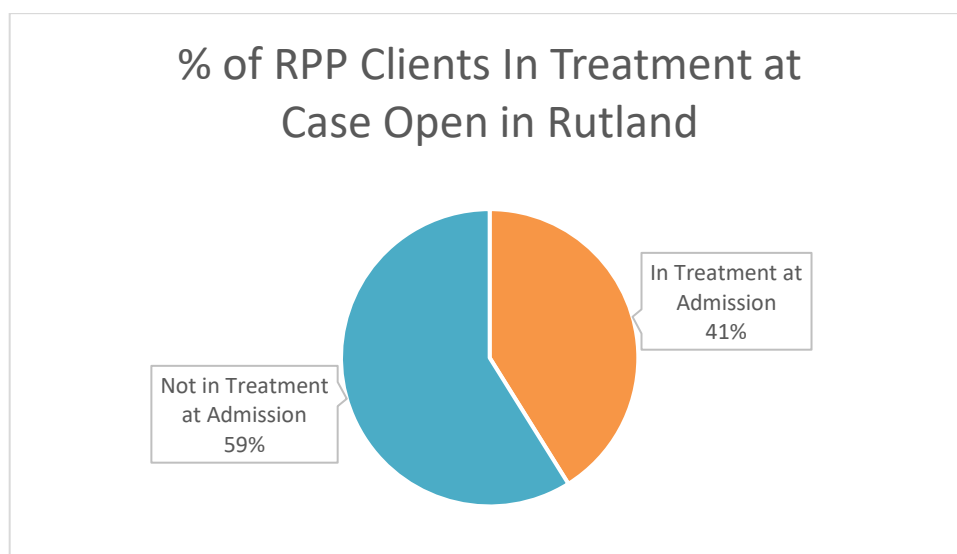
This client then had a reoccurrence and I screened her again and got her reconnected with her supports. She has made real progress with her counselor this time.”

–RPP case manager

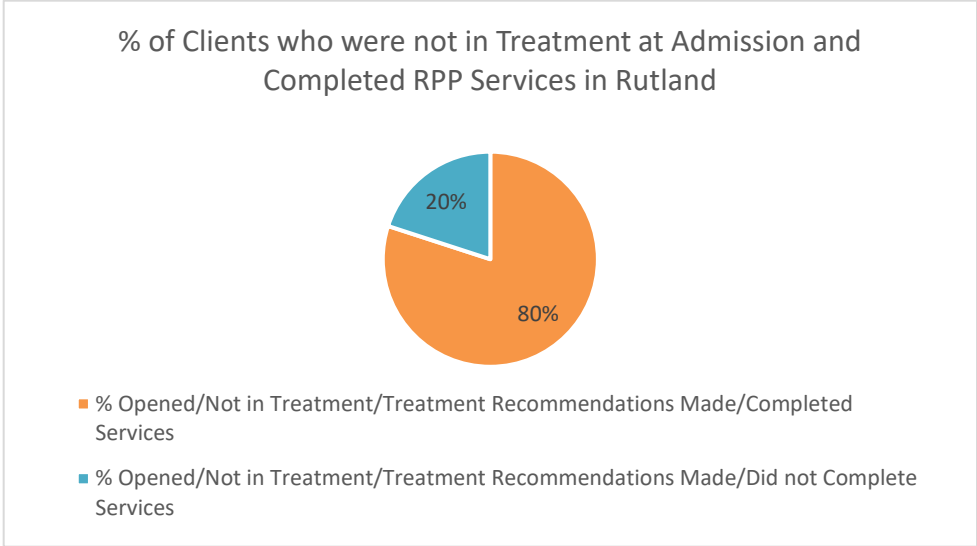
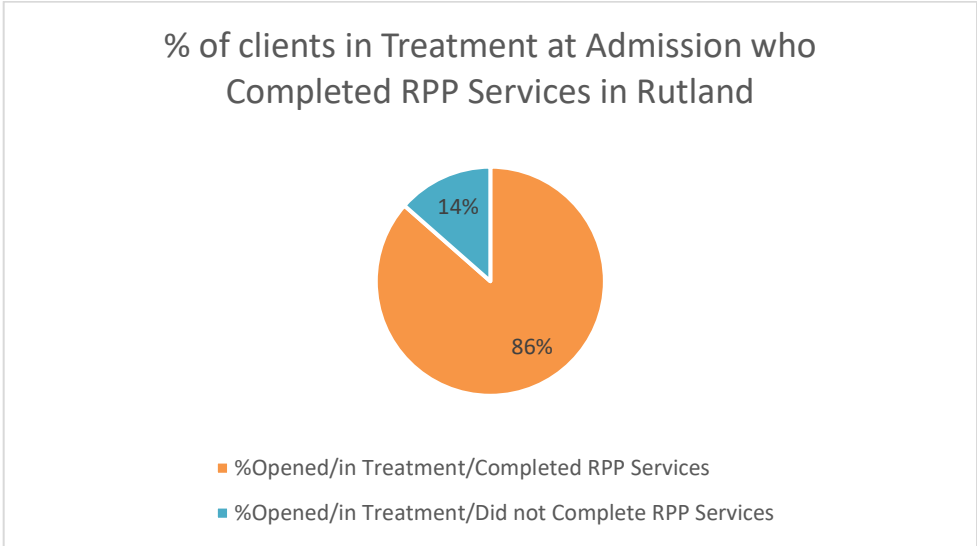
Rutland District:



- In the Rutland District Office, **109** caretakers were offered an SUD screening and **97%** of caretakers who were offered a screening, engaged in and completed the screening.
- **88%** of those screened had an indicated need for further assessment and RPP services. Subsequently, **91** clients received further RPP case management services to support their engagement in assessment and treatment
- **74%** of parents with a positive screening who were in need of further services successfully completed the program by engaging in treatment.
- **72%** of parents who had a treatment recommendation after assessment, went on to engage in the recommended treatment

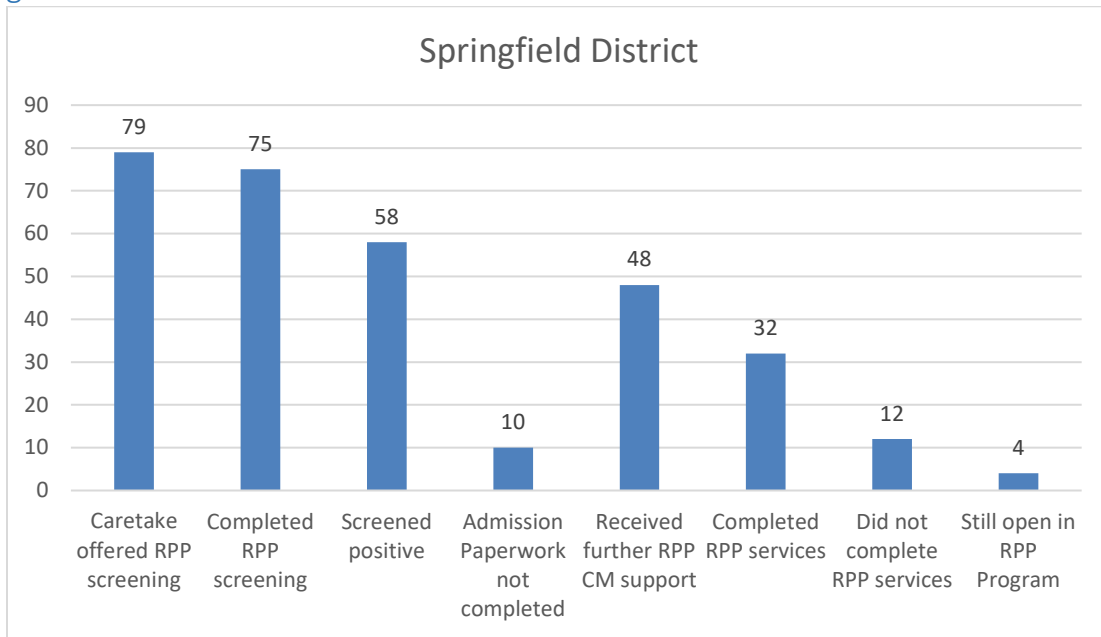


In Rutland, **38** clients were in treatment at RPP admission and **53** were not in treatment at RPP admission.

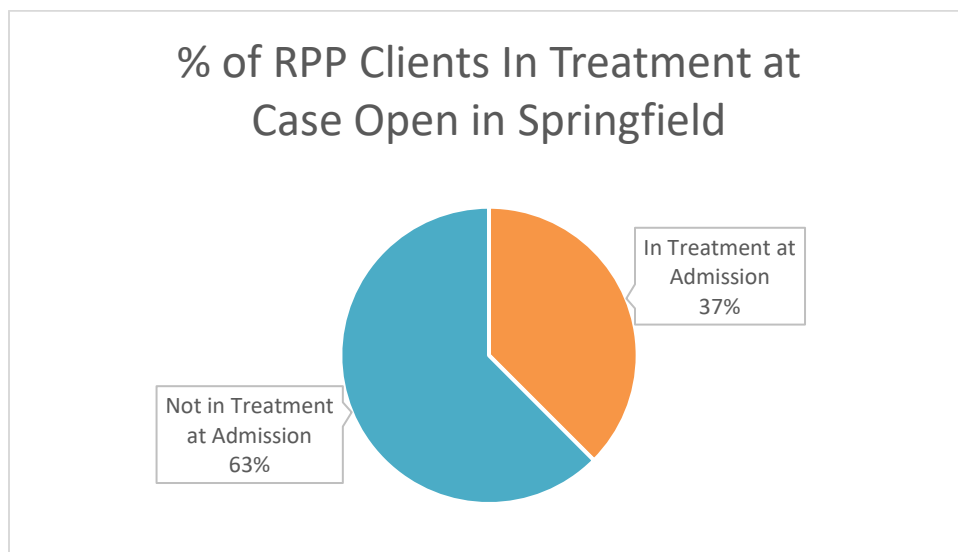


“I worked with a mom who I helped transport to Valley Vista in Vergennes and though it was a bit of a roller coaster ride she was finally able to attend and completed 2 weeks. There was a visit happening at the DCF office for the mom to see her daughter and I got a chance to say hi and check in. The mom hugged me and she and the grandma and were thankful and grateful for this program and the help they received.” –RPP Case Manager

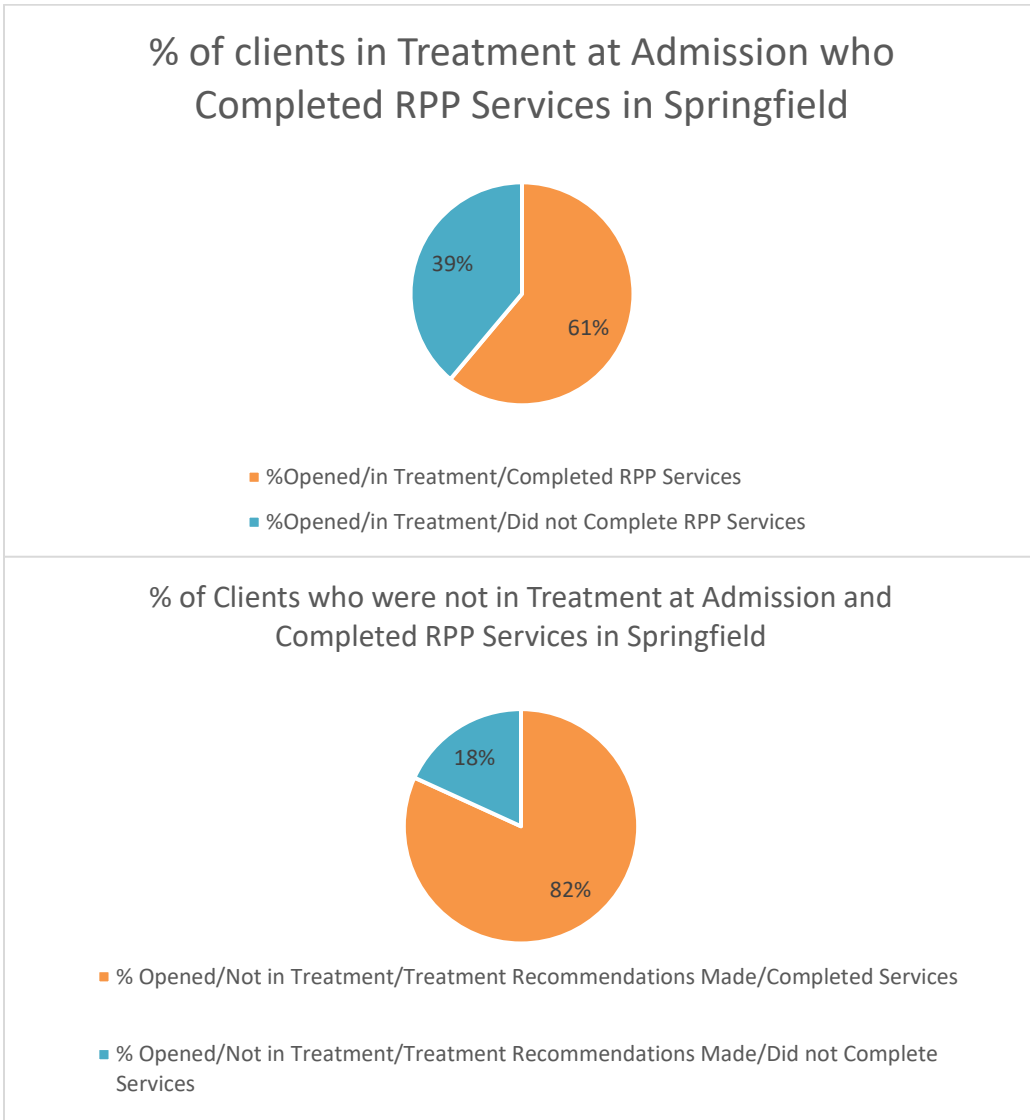
Springfield District:



- In the Springfield District Office, **79** caretakers were offered an SUD screening and **95%** of caretakers who were offered a screening, engaged in and completed the screening.
- **77%** of those screened had an indicated need for further assessment and RPP services. Subsequently, **48** clients received further RPP case management services to support their engagement in assessment and treatment
- **73%** of parents with a positive screening who were in need of further services and successfully completed the program by engaging in treatment.
- **82%** of parents who had a treatment recommendation after assessment, went on to engage in the recommended treatment

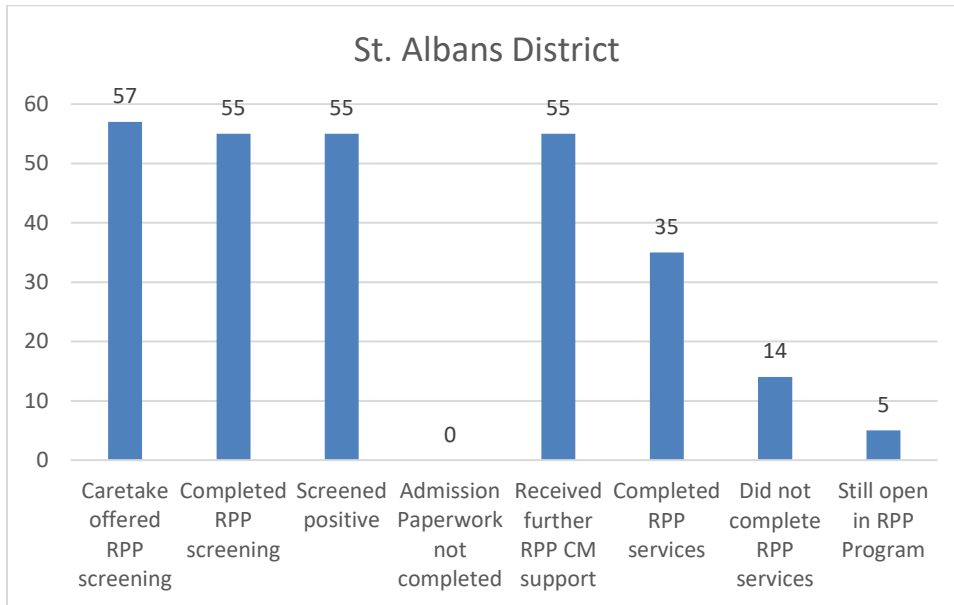


In Springfield, **18** clients were in treatment at RPP admission and **30** were not in treatment at RPP admission.



“I worked with a client who was reluctant to engage in RPP. I left the home visit and told her I would check in the following day in case she changed her mind. The following day when I reached out, this client told me she was ready for treatment and requested my assistance. I reached out to my contact at a local treatment agency and we had a same day intake scheduled. I picked up my client, took her to the program where she was prescribed Suboxone and completed an assessment. I fully believe that my relationship with my local provider and the approach I took with this client is the reason she is in treatment today.” - RPP Case manager

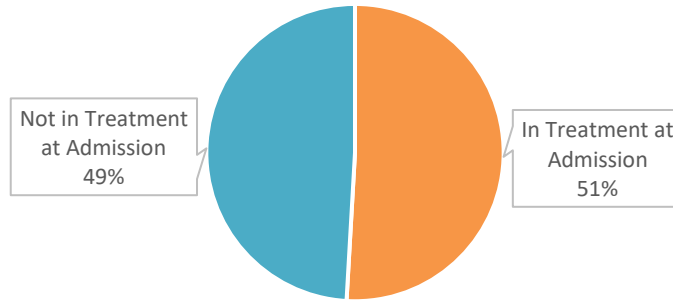
St. Albans District:



- In the St. Albans District Office, **57** caretakers were offered an SUD screening and **96%** of caretakers who were offered a screening, engaged in and completed the screening.
- **100%** of those screened had an indicated need for further assessment and RPP services. Subsequently, **55** clients received further RPP case management services to support their engagement in assessment and treatment
- **71%** of parents with a positive screening who were in need of further services successfully completed the program by engaging in treatment.
- **75%** of parents who had a treatment recommendation after assessment, went on to engage in the recommended treatment

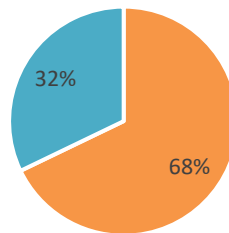
1 client was incarcerated during the course of RPP and their data was not factored into the completion rate

% of RPP Clients In Treatment at Case Open in St. Albans



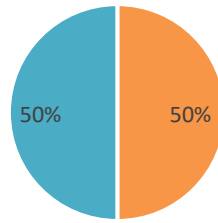
In St. Albans, **28** clients were in treatment at RPP admission and **27** were not in treatment at RPP admission.

% of clients in Treatment at Admission who Completed RPP Services in St. Albans



- %Opened/in Treatment/Completed RPP Services
- %Opened/in Treatment/Did not Complete RPP Services

% of Clients who were not in Treatment at Admission and Completed RPP Services in St. Albans

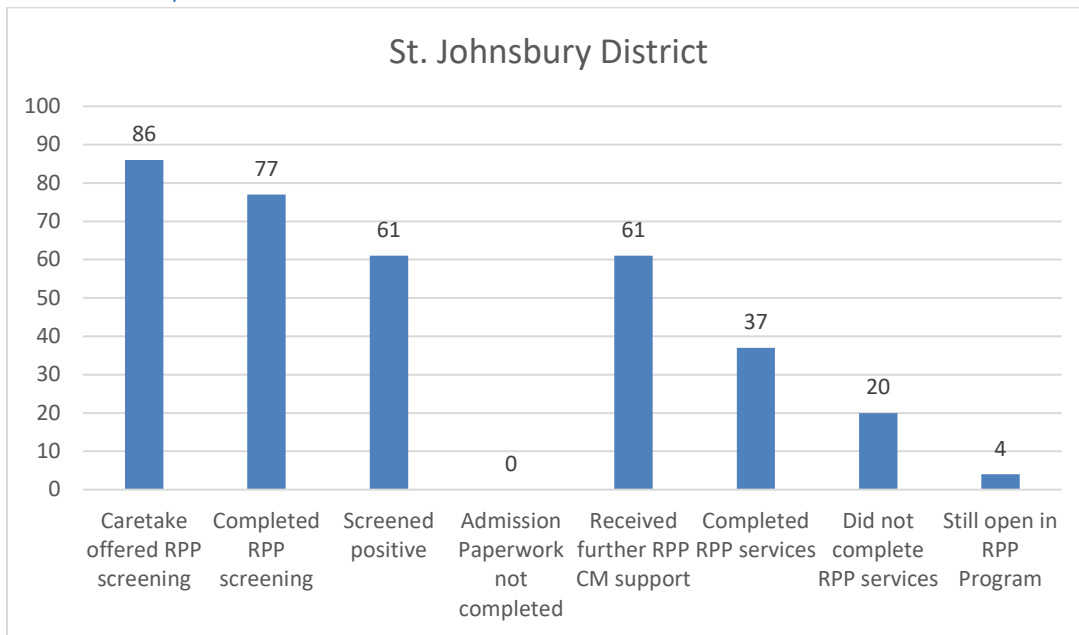


- % Opened/Not in Treatment/Treatment Recommendations Made/Completed Services
- % Opened/Not in Treatment/Treatment Recommendations Made/Did not Complete Services

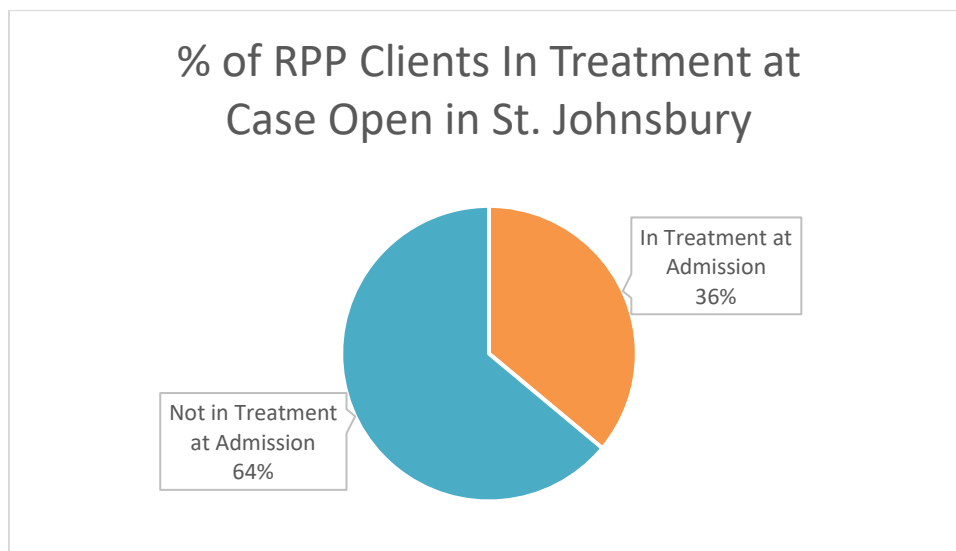
“I worked with a client in who was very anxious about DCF involvement and having to do a further assessment which I had recommended after the screening. I talked with him several times through the process before his assessment. He called me after the assessment and told me how much he appreciated the times I talked with him. He said it made the assessment much easier. He was very thankful I took the extra time to answer questions and he called just to thank me for all my help.”

– RPP Case manager

St. Johnsbury District:

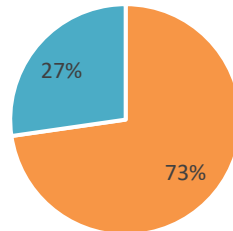


- In the St. Johnsbury District Office, **86** caretakers were offered an SUD screening and **90%** of caretakers who were offered a screening, engaged in and completed the screening.
- **79%** of those screened had an indicated need for further assessment and RPP services. Subsequently, **61** clients received further RPP case management services to support their engagement in assessment and treatment
- **65%** of parents with a positive screening who were in need of further services successfully completed the program by engaging in treatment.
- **80%** of parents who had a treatment recommendation after assessment, went on to engage in the recommended treatment.



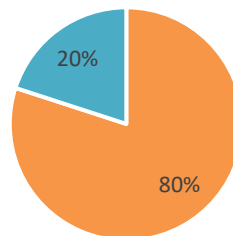
In St. Johnsbury, **22** clients were in treatment at RPP admission and **39** were not in treatment at RPP admission.

% of clients in Treatment at Admission who Completed RPP Services in St. Johnsbury



- % Opened/in Treatment/Completed RPP Services
- % Opened/in Treatment/Did not Complete RPP Services

% of Clients who were not in Treatment at Admission and Completed RPP Services in St. Johnsbury



- % Opened/Not in Treatment/Treatment Recommendations Made/Completed Services
- % Opened/Not in Treatment/Treatment Recommendations Made/Did not Complete Services

“I worked with a client who had been involved in two car accidents where she was suspected to be consuming alcohol and her children were in the car. This client had never been diagnosed with a substance use disorder and had never been in treatment. During the screening she described the isolation of Covid and how she noticed her alcohol use increased to the point where she began drinking and driving with her children. Prior to the screening (after the second accident) she had called every treatment program she could find a number for. During the RPP screening she explained that she had made contact with several providers but had no idea which one was the right fit for her. I worked with her to get an assessment and through the assessment process, a “road map” for her treatment was created. We then worked together to put the services in place. At the time of discharge, she was abstinent from alcohol and stated for the first time in her life, she finally understood what was leading to her ‘drinking’” - RPP Case manager