Participants in the College Steps Residential Program attend Castleton University.
What People Said About Services Received from RMHS*

- **88%** said they received the help they needed
- **96%** said RMHS staff treated them with respect
- **87%** said the services were right for them
- **83%** said the services they received made a difference and improved their quality of life

*from Vermont Care Partners Unified Client Satisfaction Survey
It is with pleasure that we present the 2019 Annual Report for Community Care Network. We hope you will enjoy learning more about CCN programs in our two agencies, Rutland Mental Health Services and Rutland Community Programs.

Because there are tremendous changes underway in the health and human services industry at the state and national level, we developed a new strategic direction for CCN for 2020 and 2021. This new direction will guide decision-making, how we allocate resources, and what our priorities should be – it will keep us moving in the right direction.

We started by re-examining our foundational goals, which we call Pillars. These are “big” goals and they do not change regularly. The six Pillars reflect the totality of our organizational aims as service provider, employer and community partner.

• People: Establish a workplace culture across CCN that engages staff to realize their highest potential.

• Services: Innovate, develop and continually adapt an array of accessible services to align with current and emerging needs in an evolving system of care.

• Quality: Demonstrate excellence in organizational performance and client-centered outcomes.

• Financial Health: Advance financial strength, growth and adaptability through sound business decisions.

• Community: Be highly regarded as a community provider organization within a continuum of care.

• Information Excellence: Use information to make excellent clinical, programmatic and organizational decisions, and to communicate with internal and external audiences.

Due to so much external uncertainty, two years seemed a sensible timeframe for a strategic approach, and nine strategies emerged to advance the Pillar goals.

• Maximize the new Electronic Medical Record platform and other data systems to:
  > Improve client experiences
  > Demonstrate effectiveness
  > Create workflow efficiencies

  > Share information with other providers
  > Achieve accountability expectations
  > Derive information to manage and make better decisions.

• Optimize and ensure that facilities meet current and emerging needs for efficiency, growth and consumer/staff experience.

• Promote CCN’s services and accomplishments.

• Plan and implement communication expectations and practices consistently and reliably.

• Adapt the design of our approaches and services to successfully accommodate new payment models and system expectations.

• Explore and implement new modes of service delivery that advance our population’s health and position us as an innovative provider.

• Pursue collaborative opportunities that leverage the agency’s expertise and demonstrate an open and solution-focused approach to community health and well-being.

• Establish a strengths-based approach to staff development, setting expectations, and coaching to success.

• Equip leaders with the knowledge and tools to develop highly engaged staff and teams.

In the excellent 2011 movie *Moneyball*, Brad Pitt plays Oakland A’s general manager Billy Beane as he attempts to assemble a competitive team in 2002 using analytics rather than just gut and intuition as it had always been in the baseball tradition. “Adapt or die” was his admonishment to those who questioned this non-traditional approach. While not quite so dramatic, Community Care Network is also approaching the future by employing a sound approach grounded in using data to make better decisions.

Our mission is to enhance the health and well-being of our communities, individuals and families through responsive, innovative and collaborative services. The directory of CCN programs in this report is comprehensive, and it may surprise you to learn all that CCN does to address critical community needs and improve lives in the process. Thank you for reading.

Dick Courcelle
*Chief Executive Officer*
For many families, sending a child off to college is a cherished rite of passage. The hope is that through higher education they will find good jobs and live quality lives. For parents of children with developmental disabilities, this dream is no different. But historically, that dream has been dashed against hard realities – colleges were not equipped to provide needed supports, and many people believed these very capable individuals would not be successful in a college setting.

That reality is changing. College Steps is a Vermont-based nonprofit that provides customized college support for students age 18 to 24 living with social, communication, or learning challenges. The primary goal is to prepare them for meaningful careers and autonomy after graduation from college. Academics, social interaction, and career and transition are key areas of focus, and students are empowered to become independent members of the community.

Established in 2011, College Steps served only day students until the 2018-19 academic year, when a new residential program was introduced at Castleton University in alliance with Rutland Mental Health’s Community Access Program (CAP). The College Steps Residential Program — the only residential model in the country — offers a more immersive college experience, complete with on-campus life and all of its social interactions. Additionally, it provides the supportive structure for students who want to attend college but are not within commuting distance.

There are currently two students in the program, ages 21 and 23. They rent an apartment on campus, with a professional roommate, contracted by CAP. They each have their own bedroom, but share a bathroom and other common areas. The professional roommate teaches them fundamental life skills, like laundry, grocery shopping, budgeting and paying bills. Other aspects of campus life are navigated with the help of Peer Mentors – enrolled undergraduate students who are paid employees of College Steps. Each student receives 25 hours per week of peer mentoring.

Michelle Murray is the Service Coordinator for CAP. She says this program has changed the trajectory of these students’ lives.

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Michelle Murray is the Service Coordinator for CAP. She says this program has changed the trajectory of these students’ lives.

“Both students are from Vermont, but lived too far away to commute. Neither would have been able to attend college without this model in place. Both are very comfortable
maneuvering campus on their own. They check in with each other. One of our students takes an effective speaking class, and is more comfortable speaking up in front of a group. His mom noticed how much more confident he was in advocating for himself.”

To be eligible, students must have graduated high school, and have some ability — and desire — to live independently. Team meetings at the apartment help the campus coordinator stay on top of any issues that might come up.

“Our students are enjoying every aspect of college – attending basketball games, using the pool in the gym, the rock climbing wall. One student loves theater, and worked on costumes for the Theater Department. One attends band camp. Everything that’s open to other college students, they are welcomed and encouraged to be a part of. It’s been fantastic.”

As for the future of the residential program, Michelle would like to see more students come through and be successful. But for now, a complete college experience for these two Vermont students — and their parents — is a dream come true.
Head Start is a federally-funded preschool program serving low-income families, with the overarching mission of improving educational outcomes. The program has a unique “two-generation” approach, in that it provides individually tailored social services to families while offering educational, nutritional, health, and social programming for their children.

Rutland County Head Start and its affiliated Early Care and Education programs prepare preschool children (age 3–5) from low-income families for a successful school experience through a holistic program of early childhood services. These services address key areas such as early education, nutrition, general health, and social and emotional development. Children learn how to make friends and socialize, begin lessons in reading and writing, explore creative arts and music and much more.

Young parents Kaitlynn and Jonny were living in and out of hotels, struggling to make ends meet when they were encouraged to enroll their oldest son, Connor, in Head Start. Since then, Connor (6) has gone on to public school, and now Riley (5) is enrolled in Head Start. Little brother Victor will have his turn in January when he turns 3.

“Connor was very shy at first – when we’d drop him off he didn’t want to stay, but then he didn’t want to leave,” says Jonny. “Riley had a really hard time with numbers and colors for a while, but he’s made a lot of...
Approach to School-Readiness

“I can honestly say that our family is more economically stable and grounded thanks to the services Head Start provided us.”

progress in that area. He loves playing with the other kids in the playground. When it’s time to leave, he runs around hugging his friends and his teachers.”

“When Connor first came in, he had a developmental delay,” says Kaitlynn. “He was able to get some of his services right here through Rutland Mental Health. Now he’s ready for school. And he really loves learning.”

“It’s been a great experience for both boys,” adds Jonny.

It’s also been valuable for Kaitlynn and Jonny. As part of the “two-generation” approach, Head Start supports parents and families in a number of ways, including setting and achieving personal goals, and Kaitlynn’s main goal was to find housing for her family. Recently, the couple found a permanent, affordable apartment through the Housing Trust.

“Everyone here was so supportive,” says Kaitlyn. I can honestly say that our family is more economically stable and grounded thanks to the services Head Start provided us. I don’t think a lot of people know the supports that are available. We just learned by asking for help, and I’m so glad we did.”

Kaitlynn and Jonny also participate in family engagement activities, like parenting classes, cooking classes, budgeting, health education, and more. Each family is a little different, so activities are tailored to their needs and interests.

“What moves children’s success socially, emotionally, educationally over time, and produces a lasting effect, is when the family, as a whole, is also making progress,” says Marie Gilmond, Head Start Director for Rutland Community Programs. “Head Start is truly a valuable program that educates the child as well as the entire family.”
Telemedicine: Improving Access to Care for CRT Population

Tuesdays are busy days for Rutland Mental Health Services’ psychiatry provider Joanne Matthew, APRN. She generally has a full roster of patients scheduled for medication checks at the CRT office at Court Square. She rarely misses an appointment, yet she doesn’t have to leave her home office to provide secure, confidential and meaningful services. How is this possible? In a word - telemedicine.

RMHS is now offering telemedicine as a regular service for CRT clients at the Court Square location. Telemedicine offers clinicians like Joanne the ability to meet with patients remotely for medical consultations utilizing ZOOM video conferencing technology.

“One of the things we wanted to explore was how telemedicine services could improve access to medical care,” explains Marj Trombly, Director of Adult Services. “We have CRT providers who live a good distance away. Winter weather can sometimes make it difficult to make and keep appointments. With telemedicine, these obstacles are eliminated.”

CRT clients come to their appointments at Court Square, but instead of a face-to-face meeting with Joanne, they are connected on a computer screen, in a quiet room set up specifically for remote consultations. There are staff to assist, and supportive counseling before the first appointment helps put clients at ease. Office visits are still available for those who prefer to meet in-person.

Following the success of the pilot program in July, the agency now utilizes telemedicine as a regular approach for their CRT population. According to Laura Kass, who leads the Behavioral Health division, the success with telemedicine opens the door to a broader scope of telehealth services.

“This is just the first step in providing more comprehensive health care remotely, and opens up options for psychiatric coverage in the future. We’ll be more comfortable and familiar with the technology and how it can benefit our CRT population. We’ll be more expert at it.”

Rutland Mental Health Services psychiatry provider Joanne Matthew, APRN.

Right now, the clients still come in for their appointments. But eventually, says Marj, the concept of telehealth will benefit a larger population.

“Through additional telehealth services we can potentially serve more people who have difficulty getting to our office – people out in the community, in their homes, those unable to leave the hospital. Through secure technology we can improve access and timeliness of care at every level, from evaluation to diagnosis, through consultation and treatment. We feel like the sky’s the limit, and we’ve only just begun.”

Rutland Mental Health Services Community Rehabilitation and Treatment

- 337 clients served
- 16% clients receive a regular wage
- 65% of services were delivered in the community vs. office setting

8 • RMHSCCN.ORG
On October 1, 2019, Rutland Mental Health Services launched a new cloud-based Electronic Medical Record (EMR) system. The new platform, developed and powered by Credible Behavioral Health Software, was adopted to improve efficiency, communication, and care coordination between RMHS and other healthcare providers.

Prior to Credible, RMHS used a server-based EMR system. A change in ownership of the software company, and the increasing technical demands of integrated care and population health approaches, presented an opportunity to explore alternative solutions and improved workflows. Under the leadership of IT director Jit Singh and Behavioral Health Services director Laura Kass, LICSW, Rutland Mental Health Services formed a comprehensive team to review several system choices, as well as RMHS’s workflow, billing and reporting needs. Following an exhaustive review process that included extensive input from staff throughout all divisions, the team unanimously chose Credible.

The implementation process took about 10 months to gather data, configure and test the system, train the staff, and “go live.”

Jit says the new system offers multiple benefits on both the IT side and the clinical side. “It is cloud-based, which eliminates the need for in-house servers and maintenance. The system is highly secure, HIPAA compliant, and comes with strong technical support, greatly reducing the burden on internal infrastructure. On the clinical side, our care providers now have greater flexibility in the field, with a more intuitive system and an offline solution for taking notes. By making the process of documentation easier and more accessible, we enable professionals to be more proficient in their jobs.”

Laura says improved workflow means better client care. “Some staff have been issued iPads, so they are able to do their notes, treatment plans and other paperwork in the field. We’ve tried to take the administrative burden off the clinical staff, so they can concentrate on their clients — and providing the best possible care.”

Laura admits that changing over to a whole new system has its challenges. “Change is hard for everybody, but I think once we get through the first three months people will be very pleased. They are going to realize the benefits immediately.”

Jit says the new EMR system has additional features that he expects to implement in the future, including a patient portal, dashboard builders for analytics, and the ability to exchange information with hospitals and other entities. “With this new system, we are not only updating to meet the best practices of today, we are creating capacity for the future. I’m very proud of what we’ve achieved.”
Historically, people with intellectual and developmental disabilities have lived their adult lives under legal guardianships, losing the right to make their own choices about life issues such as where to live and whether to work, marry, or receive care. Now, there is a new way of empowering people with disabilities to retain legal agency while still receiving necessary assistance. The process, called Supported Decision-Making (SDM), is an effective alternative to guardianship that is gaining momentum nationwide, and is the basis for a new CAP pilot program here in Rutland County.

Supported Decision-Making allows people with disabilities to retain all their legal rights and seek advice from trusted family members, friends, and professionals to make independent decisions about their lives. Its purpose is to reduce more restrictive means of support such as guardianship, whenever possible. Supported Decision-Making can help preserve a person’s autonomy and independence, while still providing the person with support from family, friends, and community.

Jess Nadeau is Director of Employment and Community Supports for CAP, and is part of the team that initiated the SDM pilot program. Her collaborating partners include special educators and representatives from VABIR (the Vermont Association of Business Industry and Rehabilitation).

“Our group meets monthly, and what began as general discussion about transition planning for youth in school morphed into a much larger conversation. We started talking about creating a culture of coordinated support – what it might look like to support someone who doesn’t need full guardianship.”

With assistance from nationally recognized policy advocate

Jonathan Martinis, Jess’s team developed and implemented the SDM pilot program with five students at Fair Haven Union High School in the 2018-19 school year.

“The idea is to start working with the student early in their high school career, and guide each student through a successful transition process so they can live as independently as possible after high school. We explore each student’s ability to manage key areas of life, and then we look for the resources available to them. Dream, Dig, Develop – that’s our process. We see so many who have fallen into full guardianship right at 18, then have to fight. We believe every student can be successful at something. We are all committed to making sure the student transitions into the life he or she wants.”

Finances, healthcare, education, employment, housing, social life and relationships, and legal matters are all areas that may be explored and addressed while working with each student and assessing his or her greatest areas of need. The strongest candidates for SDM are students who attend school on a regular basis, who are on a career path, or have started looking at what they want to do with their life. Parents – for whom this transition is terrifying – come through the process feeling more supported, and confident that their child won’t fall through the cracks.

Although it is still too early to measure outcomes, the response from participants has been extremely positive, and Jess says she has seen the students’ confidence go “through the roof.”

“People do best and thrive when they have control over their own lives and when they can make choices. People with disabilities are no different than anybody else. We all need
Supported Decision-Making allows people with disabilities to retain all their legal rights and seek advice from trusted family members, friends, and professionals to make independent decisions about their lives.

help making decisions and support to reach our goals. The only difference is the degree of help needed.”

The initial SDM pilot program will continue at FHUHS this school year, with an eye on expanding to other school districts if funding can be secured.

RMHS Community Access Program
Developmental Disabilities Services

412 individuals served
42 Intakes completed for new individuals
35 individuals live independently without paid home supports
5 individuals own their own home
40 individuals rented their own home
216 individuals are supported to live with family members
139 individuals live in Shared Living homes
  • 1 Shared Living Provider has 37 years of service
  • 29 Shared Living Providers have 20 to 36 years of service
  • 18 Shared Living Providers have 10 to 14 years of service
  • First Adult Family Care placement for an 88 year old gentleman, thereby allowing him to avoid Nursing Home placement. He is completely satisfied with his new home!

79% of individuals receiving Employment Supports were competitively employed
96% of individuals reported satisfaction with their services

• CAP partners with 41 employers in Rutland County who hire individuals for competitive jobs, including three new partnerships this past year.
• Employed individuals’ earnings resulted in savings of $67,393 to the Social Security Administration by reducing Supplemental Security Income (SSI) entitlements

Will, a sophomore at FHUHS, enjoying his work experience with the local transit company.
In January of 2019, Evergreen Recovery Center’s Impaired Driver Rehabilitation Program introduced a new name, an updated curriculum, and began administering the IDRP Weekend Intensive Program in White River Junction, as an alternative to the regular 4-week Non-Intensive Program offered in Rutland. Drivers with a DUI conviction in Vermont must complete the IDRP before a license can be reinstated.

“Late last fall the State of Vermont contacted us — out of the blue — and invited us to take over the contract for the Weekend Intensive Programs formerly offered through the Clara Martin Center,” said Clay Gilbert, Director of Evergreen Recovery Services. “Looking at the demand, it was clear that it could be a profitable program, and it proved to be an excellent decision. We can accommodate up to 30 people each session, and every month since we started, the group has been filled up.”

Four trained instructors administer Evergreen’s expanded IDRP, with the weekend program requiring two instructors for each monthly session. The weekend program is a popular alternative for people who want to complete their requirement quickly, conveniently, and without interfering with their life or their job. “For some, an old DUI has caught up with them, and they live out of state now. This way they can meet their requirement in one weekend,” said Clay.

Known as Project CRASH since the 1970’s, the rebranded IDRP required updating for a number of reasons – primarily because of the old acronym’s singular focus on alcohol.

Along with the new moniker, Vermont’s IDRP now utilizes the nationally-recognized Prime for Life curriculum, an evidence-based, therapeutic education program that has demonstrated success in reducing high-risk drinking and drug use.
Christopher Chadwick is Evergreen’s IDRP Manager and Screener.

“It’s really an early intervention – less judgmental,” says Clay, describing the new curriculum. “Beginning with the screening process, the program focuses on the individual, and where that person is on the spectrum of drug and alcohol use and risky behavior. In some cases, additional treatment is required by a licensed counselor before driving privileges can be reinstated.”

The IDRP includes lectures, reading materials, videos, and small group discussions. Individuals that live in Vermont and have a first or second offense may participate in either the intensive or the non-intensive IDRP. After the evaluation, the educational component takes 10 hours to complete. Evergreen/Rutland Mental Health is one of 7 agencies in the state that offer the non-intensive program, and one of 5 that offer the intensive program.

“The addition of the Weekend IDRP in White River Junction puts Rutland Mental Health in a position to work with, and help, Vermonters from all over the state,” says Clay. “It means a lot that the State of Vermont reached out to us – it really speaks to our reputation and the quality of our staff and our programs.”
Early childhood development experts agree that children need stability, consistency, and attachment to a caring adult to thrive. This is especially true for children in foster care, who have experienced trauma leading up to and including removal from their home and community. But for too many children in foster care — particularly here in Vermont — there is no stability. For them, the only constant is change.

Chynah Boise is the program originator and primary clinician at the Oak Tree Program (OTP), a new foster family support program in Rutland County designed to counsel struggling foster parents and address the chronic issue of placement instability. Chynah was a case manager with the Early Childhood Team at Rutland Mental Health Services when she realized there was an epidemic of instability in Vermont’s foster care system. “Half of the kids coming through the door were foster children. My first-ever case was a couple of kids in DCF care who had already been moved three times, and they moved three more times. I wanted to do something more for them.”

Children’s behavioral challenges are often cited among the main reasons for placement disruption. Foster parents can become frustrated, angry, and exhausted as they try to manage their child’s reactive behaviors. Chynah teaches foster parents trauma-informed parenting skills, along with confidence, coping skills, and a deeper understanding of the child in their care. She also gives foster parents the opportunity to just vent.

“Because the focus in foster care is all on the child, the resource parent is not often asked, ‘How are you doing?’ What I’m hearing from parents is they feel better, just to have someone to talk to.”

Chynah says the right support can equip new foster parents and kinship caregivers with essential information about caring for children who have experienced significant trauma. “We
always start with trauma. Sometimes it’s family work they need, and sometimes it’s advocacy. I go to a lot of meetings with families — school meetings, DCF meetings, team meetings — to help the foster parents find their voice.”

The Oak Tree Program started in January as a collaboration between Rutland Mental Health Services and Vermont Department for Children and Families (DCF), and as its sole clinician in the program, Chynah is currently working with 14 families. The mutual goal is permanency, whether with the birth family or the out-of-home placement.

“These kids need roots. When you’re bouncing around from home to home, you can’t make those roots. Resilience grows when you have strong supportive relationships, meaningful involvement in the community, and a big natural support network — those things can only really happen if you have permanency.”

Chynah says the greatest reward is seeing families stay together. “If I can help with one interaction — help that family find joy, see them laugh together and enjoy each other — that is truly gratifying. My hope is that our program is keeping kids in their homes, and that’s going to increase positive outcomes.

“I would also like to see our program bring Rutland Mental Health Services and DCF closer, to work more collaboratively. I would like to see kids coming into custody receiving more front-end mental health evaluation and counseling, with the ability to place them more sensitively. That’s my hope, that we become more of a family with our community partners. 🌳
Caring for a loved one with special needs can be deeply rewarding; but it can also be stressful, demanding – even overwhelming at times. Whether it’s caring for a parent with dementia, or a loved one with a medical or physical impairment, the demands of around-the-clock care can take a toll on even the most compassionate, committed caregivers.

InterAge Adult Day Program provides respite for families and caregivers in Rutland County, while fostering health and independence for its adult participants. InterAge is a full-service, medical model program serving Rutland County adults 18 and older who may have dementia or other cognitive impairments, medical issues or physical challenges, and elders who may be socially isolated.

For Loryn Hamilton, who has been on staff at InterAge for 18 years — and director for 13 — the best part of the job is interacting with participants, and bringing joy to their lives. “There’s always one story that stands out – we had a woman years ago, she was nonverbal, in the throes of dementia. Within six months of being with us, she was talking, conversing, singing, participating in activities. That has always stood out in my mind. She was living with her family – they needed the respite, and she needed the socialization. It’s really nice to know that we’ve given this gift to the person we are serving. Seeing an outcome like that makes it all worthwhile.”

The primary goal of InterAge is to prevent or delay institutional care for its participants by promoting independence, socialization, optimum health, fitness and creativity, in addition to providing valuable respite to families and caregivers.
“One of the biggest misconceptions about InterAge is that it is only for the elderly, or people with Alzheimers,” says Loryn. “We are trying to debunk that myth. The fact is we serve adults both young and old, with and without cognitive issues. Right now our participants range in age from 54 to 94.”

Loryn and her staff of six work together to facilitate the provision of care and supportive services. Eligible participants receive therapeutic, social, health monitoring and nursing services. Every participant has an attendance schedule based on caregiver need, his or her own need, and funding. A full-time activities director organizes workshops, guest speakers, discussion groups, entertainment and more, providing continuous opportunities for social interaction, physical and cognitive stimulation. Additional offerings include RSVP Bone Builders, bi-monthly wellness workshops, and a monthly Caregiver Support Group.

“It’s important to note that most of our participants are not here because they choose to be – they are here because their caregiver needs them to be. We want to make the program as engaging and interesting as possible, so that those who may not have chosen to be here do want to stay.”

One of thirteen state-certified adult day programs in Vermont, InterAge currently serves an average of 24 participants daily at their location in Tenneybrook Square at 230 North Main Street. The center is open Monday through Friday, 8am – 5pm. Funding is available through Medicaid, Veteran’s Administration, Private Long-Term Care Insurance, American Parkinson’s Association, Federal and State Grants or privately based on income.

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**Rutland Community Programs**

**Older Adult Services**

- **799** volunteers gave 153,287 hours of service valued at $3.9 million* to the Rutland County Community.

- **300** RSVP Bone Builders volunteer trainers provided 52,134 hours of service leading classes twice weekly at 54 sites in Rutland and Addison counties to 1,014 participants.

- **26** One-2-One volunteer drivers provided 6,495 hours of service to 250 clients, providing 4,302 round trips over 167,877 miles.

- **53** Foster Grandparents provided 49,715 hours of service to 18 sites, impacting 201 children.

- **24,869** hours of service to 52 participants throughout Rutland County allowing them to live more independently outside of residential care.

- **RSVP, FGP and One-2-One:** 852 volunteers provided 203,002 hours valued at $5.1 million* to Rutland and Addison County communities.

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*based on Vermont Department of Labor Average Hourly Wage
Community Care Network is comprised of Rutland Mental Health Services and Rutland Community Programs. The mission of CCN is to enhance the health and well-being of our communities, individuals and families through responsive, innovative and collaborative services. The programs of Community Care Network serve more than 3,000 people each year throughout Rutland County. The dedicated 400-plus staff of Community Care Network are focused on improving the health and well-being of Rutland County residents and their families living with mental health, substance abuse, and co-occurring disorders.

**BEHAVIORAL HEALTH**

**Adult Services**

**Community Rehabilitation and Treatment.** Comprehensive services using a multi-disciplinary treatment team approach for adults with severe mental illness. CRT offers a wide range of support options to help people remain integrated in their communities, while building strategies to live more independent and satisfying lives.

**Vocational Opportunity Works.** Supported employment services to individuals with mental health and co-occurring disorders.

**Outpatient Treatment.** Individual and group therapy includes daily stabilization group, women seeking safety group, weekly aftercare group and anger management group, psychiatric evaluations and medication management.

**Eldercare.** Outreach mental health services to homebound elders, including clinical assessment and case management.

**Emergency Crisis Services.** Available 24-hours-a-day, 7-days-a-week, providing emergency supportive counseling by telephone or in person.

**Integrated Clinical Case Management.** Provides mental health services to adults experiencing emotional or behavioral distress severe enough to disrupt their lives, who are medical patients at the Community Health Centers of the Rutland Region, but who do not meet eligibility criteria for Community Rehabilitation and Treatment services.

**Substance Use Disorders Services.** Substance abuse treatment services, including alcohol and drug assessments for individuals age 12 and older. Includes Outpatient treatment, Intensive Outpatient Program-Adult (Quitting Time), Impaired Driver Rehabilitation Program (Rutland County and weekend program in White River Jct.), Case Management, Rocking Horse Program, Rutland County Treatment Court(Federal Drug Court), Collaboration with Reach Up, Healthy Women’s Program and Elder SUD Services.

**Crisis Stabilization and Inpatient Diversion.** Short-term stays for adults with acute psychiatric symptoms to help avoid the need for a higher level of care such as an inpatient psychiatric hospital or to serve as a step-down from inpatient psychiatric care to prepare for a return to community-based support.

**MapleWood Recovery Residence.** Supervised and supported recovery intervention services in a residential location for adults in the early stages of recovery.

**Welcome Home.** A joint program of Rutland Mental Health Services (RMHS) and The Homeless Prevention Center (HPC) of Rutland County, providing housing and support services utilizing the Housing First model to people who experience chronic homelessness.

**Child and Family Services**

**Early Childhood.** Mental health services and supports for children (birth to age 6), adolescents and families that promote mental health; prevention services to reduce risk factors and increase resiliency and protective factors; and comprehensive intervention and treatment services to children and youth with serious social, emotional and mental health needs.

**School-Based.** In-school clinicians provide mental health services including family therapy, case management, substance abuse counseling, and daily one-on-one behavioral intervention and skills building in many Rutland County schools to support academic success.

**Outpatient and Case Management.** For children birth to age 18 and their families, psychotherapy (individual, family, group), case management, psychiatric evaluation, and medication management for mental health, substance abuse, and co-occurring disorders.

**Intensive Family Based Services.** Intensive, home-based services to children at risk of removal from their home due to emotional or behavioral problems and also when there is a reunification of a child back home from an out-of-home placement.

**Respite.** Short-term support and relief to families of children and adolescents with significant mental health issues.

**Vermont Outdoor Adventure Program.** Therapeutic skill-building and experiential learning activities provided in a wilderness setting.

**J.O.B.S. (Youth Transitional Services).** Youth ages 14–26 are helped to overcome employment barriers, sustain healthy relationships, and manage the issues of day-to-day living.

**Rapid Response.** Immediate community-based supports to children returning home following a crisis assessment or a hospital/residential placement.

**Wraparound and ABA Program.** Applied behavior analysis services for children on the autism spectrum.

**DEVELOPMENTAL DISABILITIES SERVICES**

The Community Access Program (CAP) provides an array of comprehensive, person-centered supports and services to children and adults with developmental disabilities and their families.

**Service Coordination.** Assists individuals in planning, developing, accessing, coordinating and monitoring supports and services.

**Home Supports.**

**Supervised Living:** Supports provided to individuals who live in their own home/apartment or that of a family member.
with mental illness, developmental disabilities and substance use disorders. A list of programs appears below. For more information about the wide range of comprehensive services at CCN, please visit our website at www.rmhcscn.org.

**Staffed Living:** 24-hour supports provided to one or two adults living in their own home/apartment.

**Group Living:** 24-hour supports for four adults living in our licensed group home.

**Shared Living:** Supports provided to one or two individuals living in the home of a shared living provider.

**Westview Court Intermediate Care Facility for Individuals with Intellectual/Developmental Disabilities:** 24 hour intensive health care and therapeutic services provided for six adults in a home environment.

**Health Services Coordination.** Nurse Consultants help coordinate and monitor health care for individuals receiving staffed, group, or shared living supports.

**Respite Supports.** Provide family members and shared living providers a break in caring for an individual.

**Community Supports.** Assist adults to develop skills and social connections through volunteering, recreation, leisure, and educational opportunities.

**Employment Services.** Assist adults to obtain and sustain competitive employment and achieve career goals.

**Project SEARCH.** Workplace immersion program for students with intellectual disabilities in last year of high school or young adults that helps them learn skills and obtain competitive employment through collaboration with CAP, the Rutland School district, Rutland Regional Medical Center, and Voc Rehab.

**College Steps.** Supports students living with social, communication, or learning challenges to make successful transitions into college life at Castleton University while learning new skills and preparing for meaningful careers. College Steps Residential program provides a unique support model to select students. Two students are supported by a professional roommate in a 3 bedroom apartment to develop independent living skills while attending Castleton University.

**Clinical Services.** Access to psychiatric services, therapies, behavioral consultation, and other clinical supports.

**Crisis Services.** Support for individuals who are experiencing a psychiatric, behavioral, emotional, or medical crisis.

**Transportation.** Reimbursement for mileage to access community supports. Assistance for individuals requiring an accessible vehicle to acquire and maintain accessible transportation.

**Bridge Care Coordination.** Support for families to access and coordinate needed services and resources for children up to age 22.

**Family Managed Respite.** Provides families with a break from caring for their child with a disability up to age 21.

**Flexible Family Funding.** Available to families to support their child or adult family member to live at home.

**Specialized Services in a nursing facility.** Services for individuals 18 years old and older living in a nursing facility who need additional social, behavioral, or communication supports related to their disability beyond the scope of the nursing facility.

**Choices for Care Adult Family Care.** A 24-hour shared living option for individuals at least 18 years old who meet clinical criteria for nursing home level of care.

**RUTLAND COMMUNITY PROGRAMS**

**InterAge Adult Day Program.** A full service, medical model adult day program offering socialization, a variety of activities and health supports to adults 18 and older with cognitive and/or physical impairments, and to socially-isolated elders. These services allow program participants to remain at home, active in their communities and delay or prevent institutional care.

**One-2-One.** Volunteer drivers provide essential services transportation to adults 60+.

**Green Mountain Foster Grandparents.** Volunteers provide mentoring and role modeling for children of all ages in a variety of educational settings throughout Rutland, Bennington, and Addison Counties. These intergenerational relationships enrich both the volunteers and the children they serve.

**RSVP and The Volunteer Center.** Provides individuals of all ages with a variety of interesting and diverse volunteer opportunities throughout Rutland and Addison County in over 150 non-profit agencies. Our locally-designed Signature Programs, RSVP Bone Builders and RSVP Operation Dolls and More, also respond to the needs of our communities.

**Early Care and Education / Rutland County Head Start.** Our 5-STAR early care and education programs prepare children and families for a successful school experience through comprehensive, integrated, family-centered services. Comprehensive programming integrates successful learning, medical, dental and mental health support; social services; and parent engagement for income-eligible, preschool-age children and their families.
RUTLAND MENTAL HEALTH SERVICES:

**Revenue by Source:**
- 84% Medicaid
- 3% Private Insurance, Self-Pay, Misc.
- 10% State Grants & Contracts
- 3% Other Contracts & Town Giving

**Expenses by Programming Area:**
- 59% Developmental Disabilities Services
- 17% Behavioral Health Child and Family Services
- 4% Substance Use Disorders
- 2% Behavioral Health Adult Services
- 18% Community Rehabilitation & Treatment/Crisis Services

RUTLAND COMMUNITY PROGRAMS:

**Revenue by Source:**
- 52% Federal Grants & Contracts
- 25% State Grants & Contracts
- 1% Local Contracts and Support
- 1% Miscellaneous & Town Giving
- 2% Medicaid
- 19% Other Fees

**Expenses by Programming Area:**
- 4% One-2-One
- 9% Green Mountain Foster Grandparents
- 11% Interage Adult Day Program
- 5% Retired Senior Volunteer Program
- 71% Head Start/Early Childhood Education & Care

Number of Individuals Served by Rutland Mental Health Services: 3,370 (unduplicated)
### Number of Individuals Served by Town (July 1, 2018–June 30, 2019)

<table>
<thead>
<tr>
<th>Town</th>
<th>Individuals Served</th>
</tr>
</thead>
<tbody>
<tr>
<td>BENSON</td>
<td>30</td>
</tr>
<tr>
<td>BOMOSEEN</td>
<td>36</td>
</tr>
<tr>
<td>BRANDON</td>
<td>208</td>
</tr>
<tr>
<td>CASTLETON</td>
<td>96</td>
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<tr>
<td>CHITTENDEN</td>
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<tr>
<td>CLARENDON</td>
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<tr>
<td>DANBY</td>
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<tr>
<td>FAIR HAVEN</td>
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<tr>
<td>FORESTDALE</td>
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<tr>
<td>HUBBARDTON</td>
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<tr>
<td>HYDEVILLE</td>
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<tr>
<td>IRA</td>
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<tr>
<td>KILLINGTON</td>
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<tr>
<td>MENDON</td>
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<tr>
<td>MIDDLETOWN SPRINGS</td>
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<td>MOUNT HOLLY</td>
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<tr>
<td>MOUNT TAVOR</td>
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<tr>
<td>PAWLET</td>
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<tr>
<td>PITTSFIELD</td>
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<tr>
<td>PITTSFORD</td>
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<tr>
<td>POULTNEY</td>
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<tr>
<td>PROCTOR</td>
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<tr>
<td>RUTLAND CITY &amp; TOWN</td>
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<tr>
<td>SHREWSBURY/CUTTINGSVILLE</td>
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<td>SUDSBURY</td>
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<td>TINMOUTH</td>
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<td>WALLINGFORD</td>
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<td>WELLS</td>
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<td>WEST HAVEN</td>
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<tr>
<td>WEST RUTLAND</td>
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<tr>
<td>OTHER TOWNS</td>
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</tr>
<tr>
<td><strong>TOTAL</strong></td>
<td><strong>3,370</strong></td>
</tr>
</tbody>
</table>
Rutland Mental Health Services
Behavioral Health Child, Youth, and Family Services

1064 children and youth served

40% increase in contracts with area schools (or 25 contracts with Rutland County schools for clinicians and/or behavioral interventionists)

85% offered initial assessment appointment within five business days of request

82% said their child received the help needed.

90% reduction in waiting time for outpatient therapy

85% said the services made a difference in the life of their child

Over 250 Adventure Therapy group outings (ages 3 – 18)

Over 230 Hours of consultation to area childcare providers, partners and families

ON THE BACK COVER:
Rock Climbing as Experiential Therapy for Teen Substance Use

Clinicians within the Child & Family Program, Kristen Casella and Rebecca Day, developed a unique approach for accessing and supporting teens who struggle with substance use. Their climbing group, held at the Green Mountain Rock Gym, brings teenagers together to discuss the reasons they use substances, and learn new ways to manage challenges in their lives. It’s an effective approach because it appeals to youth who aren’t interested in a traditional therapy approach or talking about the dangers of substances. Climbing also involves an element of risk, which tends to mirror what youth are often seeking through substances. The group offers a space where youth feel like they belong and have each other’s backs. Rock climbing also offers an opportunity to introduce mindfulness and body awareness. Clients learn to be fully present in a way that is less intimidating than meditation and other techniques.

Dre Trudeau and Becky Day (r) with a rock climbing participant (l)

CHILD AND FAMILY participate in a staff retreat at Mountain Top Inn in Chittenden, Vermont.
We Honor our Long-Serving Staff:
The following Community Care Network staff were honored at the 2019 Staff Recognition Luncheon for their many years of dedicated service. We offer our sincere thanks to them for their strong commitment to the mission of CCN.

20 Years
Ronald Aguiar
Carolyn Day
Michelle Poczobut
Mark Quesnel
Patricia Searles

25 Years
Debra Esslinger
Diana Fouracre
Lynette Gorman
Tanya Hall
Linda Heald
Deborah Poljacik
Laura Ross

30 Years
Debra Avison
Sheryl Gebauer
Barbara Ouellette
Anna Pietryka
Claire Waterman

35 Years
Crestina Berry
Jean Lamarre
Mary Waldvogel
MISSION: To enhance the health and well-being of our communities, individuals and families through responsive, innovative and collaborative services

VISION: To be the provider and partner of choice, advancing services that transform and empower lives

Rock Climbing as Experiential Therapy

PHOTOGRAPHY: Caleb Kenna Photography, CCN Staff; GRAPHIC DESIGN: LMWDesign, Inc.