



Substance Use Disorder System of Care Enhancements Project

**Vermont Department of Health
Division of Alcohol and Drug Abuse Programs**

Request for Information (RFI) Response Themes & Stakeholder Input Sessions



Agenda

Enhancements Project Overview

- ❖ Goals
- ❖ Stakeholders
- ❖ Major themes from initial stakeholder input meetings
- ❖ Request for Information

Review of Themes from RFI Responses

Facilitated Discussion-Stakeholder Input on RFI Response Themes

Plan for Stakeholder Input-Next Round

Project Next Steps

System of Care Goals



- ▶ All Vermonters will have access to a core set of evidence-based services
- ▶ Value based payment structure to incentivize a higher quality of care and outcomes for Vermonters
- ▶ One SUD treatment system, agnostic of substance, able to meet the needs of the individuals
- ▶ Enhanced care coordination to include the physical health care system, co-occurring, and recovery services
- ▶ A seamless system that is easy for clients to access and navigate (includes intervention, interim, co-occurring, recovery, and care management services)

Goals cont.



- ▶ Reduce duplicative effort on behalf of the client, includes financial savings (e.g., multiple assessments)
- ▶ Recruiting and retention of high-quality staff, includes competitive wages/benefits, staff development career ladders, and co-occurring capacity
- ▶ A reduction in administrative functions would increase QI activities geared towards improving care for Vermonters
- ▶ Reduction in state resources to administratively execute legal agreements

Stakeholders for RFI Development

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- ▶ 12 Vermont Recovery Centers
 - ▶ VT Association for Mental Health and Addiction Recovery
 - ▶ Vermont Recovery Network
 - ▶ VT Association of Addiction Treatment Providers (VAATP)
 - ▶ Rutland Regional Medical Center
 - ▶ Valley Vista
 - ▶ Clara Martin Center
 - ▶ Counseling Services of Addison County
 - ▶ Health Care and Rehabilitation Services
 - ▶ Central Vermont Substance Abuse Services
 - ▶ Behavioral Health and Wellness Center (CHSLV)
 - ▶ Northwestern Counseling Services
 - Rutland Mental Health
 - Northeast Kingdom Human Services
 - BAART Behavioral Health Services
 - United Counseling Services
 - Lund Family Center
 - Spectrum Youth and Family Services
 - Treatment Associates
 - Washington County Youth Services Bureau
 - Recovery House
 - Habit Opco
 - Howard Center
 - Centerpoint Adolescent Treatment Services
 - University of Vermont Medical Center – Day One
 - ▶ Recovery Services Consumers
 - ▶ Treatment Services Consumers*
 - ▶ Department of Corrections (DOC)*
 - ▶ Gainwell
 - ▶ Substance Misuse Prevention Oversight and Advisory Council
 - ▶ Intervention, Treatment and Recovery Workgroup (ITR)
 - ▶ Family Action Group
 - ▶ Department of Mental Health (DMH)
 - ▶ Department of Vermont Health Access (DVHA)
 - ▶ Blueprint for Health
 - ▶ Agency of Digital Services

Major Themes from Stakeholders

- One size does not fit all – services need to meet the need of the individual
- Ensure coordination of services/ “breakdown silos”
- Access to the continuum of services is not the same statewide
- Continue to build on existing community relationships and linkages
- Existing workforce is aging
- Recruitment and retention of staff is challenging and system must address this issue
- Need to move beyond the fee-for-service model
- Blending funding can be challenging
- Reporting with a focus on outcomes, quality measures, must meet federal requirements
- Reduce administrative burden to increase focus on quality oversight
- More focus needed on co-occurring conditions
 - Integration with mental health system
 - Integration with physical healthcare system
- Need to include social determinants of health (e.g., housing, access to transportation)
- Need to make it easier to access services (e.g., co-location, “no wrong door”)
- Need to make it easier for the individual to navigate the system
- The full continuum of services needs to be included (intervention, treatment, and recovery)
- Need to include health equity and cultural competence lens
- Ensure minimum standards for training/skill of staff, quality of care

Request for Information (RFI)




- ▶ Developed based on the goals of the project and input from the stakeholders
- ▶ Posted on February 26, 2021
- ▶ Responses were due on April 29, 2021
- ▶ VDH received 13 responses
- ▶ A team from ADAP and DMH reviewed the responses and identified key themes and opportunities

Themes from RFI Responses



Responses overall:

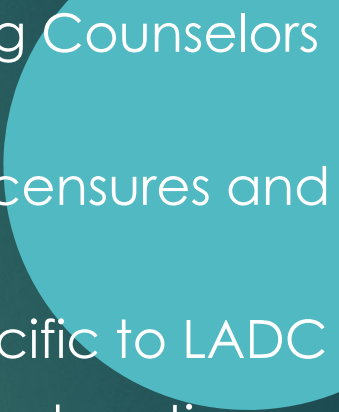
- ▶ Validating and affirming that there are a lot of strengths in our system **and** opportunities to make enhancements and improvements
 - ▶ There are models/examples we could look to
 - ▶ Demonstrated agreement that enhancements are needed
 - ▶ Identified room for improvement in coordination and collaboration
 - ▶ In agreement that co-occurring care is an important focus
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Experience of the client:

- ▶ The system is evolving towards a no wrong door but experiences could be very different based on the door entered
- ▶ Service coordination is important for the client experience of care
- ▶ Question of whether all SUD providers in all areas of the state know all of each other and what they do to allow for enhanced coordination across the system
- ▶ There is the potential that clients don't know what is available to them
- ▶ Warm hand off culture has significant opportunity for enhancement
- ▶ Alcohol, gambling, stimulants, the system needs to be more inclusive of substance use and Addiction beyond OUD
- ▶ Opportunities for enhancements for services to other specialty populations like adolescents




Workforce:

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- ▶ Limited number of Licensed Alcohol and Drug Counselors (LADCs)
 - ▶ Opportunities identified for looking at other licensures and SUD competencies
 - ▶ Frustration with OPR process for licensure specific to LADC
 - ▶ Need to look at pathways to getting credits/education needed for licensure



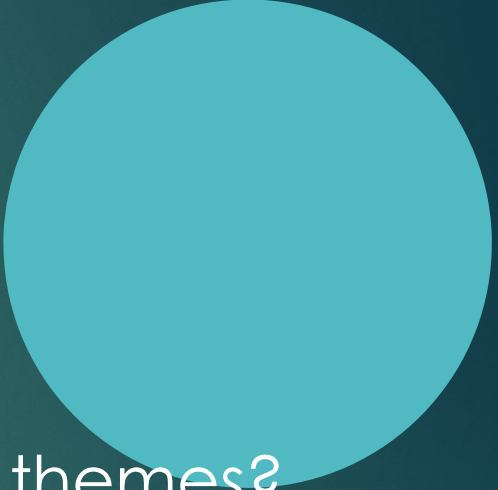
Administration:

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- ▶ Opportunities to look at reporting requirements
 - ▶ Clarification of documentation requirements and opportunities for streamlining
 - ▶ State needs to provide more clarity around the currently allowable billing codes for the Preferred Providers.
 - ▶ Current funding structure does not support the potential enhancements
 - ▶ Helplink could be better optimized to support enhanced access, coordination and successful transitions across the continuum of care

Stakeholder Input-Discussion



Experience of the Client
Workforce
Administration



- ▶ What surprised you in the RFI response themes?
- ▶ How would you prioritize the themes identified through this process? Are there themes that you see as more or less of a focus?

Next Round of Stakeholder Input



VDH-ADAP has developed an on-line survey to elicit stakeholder input of the system of care enhancements project.

The survey will have the option to be completed anonymously.

The survey will be sent via e-mail to the stakeholders who have already provided input and will be posted to the VDH-ADAP website.

The survey will include information about the project to date and can be disseminated to others within your organization to gain the widest stakeholder reach.

Next Steps



- ▶ E-mail with survey link to go out to stakeholders
- ▶ Survey will be posted to the website
- ▶ Survey responses will be due September 1, 2021
- ▶ The System of Care Enhancements project team will review responses and compile input to inform next steps for the project, which may include development of one or more Request(s) for Proposals (RFPs)