

Lamoille Community Connections

72 Harrel Street
Morrisville, VT 05661
(802) 888-5026

Emergency Services

520 Washington Highway
Morrisville, VT 05661
(802) 888-4914 (8am - 4pm)
(802) 888-4231 (4pm - 8am and weekends)

Copley House

379 Washington Highway
Morrisville, VT 05661
(802) 888-7323

Johnson Group Home

Stearns Street
Johnson, VT 05656
(802) 635-7174



· WHERE PEOPLE & POSSIBILITIES COME TOGETHER ·



Annual Report 2010



pitalization rates and high employment rates for CRT consumers. The program has successfully created four compensatory employment positions held by consum-

ers; one Peer Supported Employment position, three Peer groups leaders, and one sub medication/crisis support staff. This employment opportunity offers consumers an opportunity to gain occupational and social skills that are essential for permanent and competitive job placement in the community.

The goal of the CRT program is to continue working on developing an "outcomes based program" based on SAMHSA national domains and outcome measures compatible with the Challenges for Change legislation. This includes reduced morbidity, decreased mental illness and substance abuse symptomology, increased family psychoeducation and connectedness, vigorous supported employment, and decreased criminality by working in collaboration with the Department of Corrections. The CRT program will continue to help consumers maintain their short and long-term recovery goals by using strategies and techniques as outlined by Evidence Based Practices. We will continue to compare our Supported Employment and other clinical practices to standards and adjust our practices to better match these standards. We will continue to monitor outcomes from each consumer to ensure that the practices we are using are effective.



CRT Senior Leadership Team,
Kelley Longe, Sherry Marcelino, Martin Brutus

Community Rehabilitation Treatment

The CRT program has initiated progressive restructuring this year by replacing the Director's position with a Senior Leadership Team, comprised of a group three knowledgeable and experienced individuals who reinforce the agency's mission statement of providing quality mental health services for the Lamoille Valley, thus enhancing independence and quality of life for adults who struggle



with severe and persistent mental illness. Our mission is to take an integrative team approach to strengthen the collaborative work we do internally, as well as to improve and enhance the work that we do with treatment providers within our community. Internal and external collaboration is essential to

improving our consumer's sense of empowerment, competency, hope, and social skills, in addition to supporting and sustaining their long term recovery and rehabilitation back into the community. In an effort to increase efficiency and reduce redundancies in services that are provided, we have redefined our Case Management job description and responsibilities so that treatment planning is more recovery oriented, client-centered, and time limited based on the needs of the consumer. By clarifying roles and utilizing clinical strengths within our program, we have the capacity to implement a positive culture change at LCC that promotes the evidence that mental illness is treatable, and does not have to be a life-long or permanent condition.

The program's goal of successful recovery can be distinguished by our continued low psychiatric hos-



Mission

Lamoille County Mental Health Services, Inc. is a nonprofit organization providing quality developmental and mental health services to the Lamoille Valley area enhancing independence and quality of life.

Vision

A community with wellness at its core and clear access to a comprehensive continuum of quality care of services.



**Lamoille Community Connections
Board of Directors**

Craig Provost, President
Ken Hoepner, Vice President
David Vinick, Secretary
Ted Lambert, Treasurer
Jason McArthur
Lori Cyr
Bev Allen
Paul Griswold
Ed French
David Yacovone

Over the past year Lamoille Community Connections Board of Directors has had growth in membership. The agency is fortunate to have a volunteer citizen board with the dedication and leadership that has seen the agency through several significant changes over the past year. Thank you for your guidance and energy that you have brought to the staff, consumers and the community.

Senior Leadership Team

Savi Van Sluytman, Executive Director
Jane Modica, Director of Human Resources
Jennifer Stratton, DS Director

Community Rehabilitation Treatment Leadership Team:

Kelley Longe
Sherry Marcelino
Martin Brutus

Children Youth and Family Services Leadership Team:

Jessica Dambach
Carol Slayton
Lauren Johnson
Carolyn Aaronson
Cindy Olsen
Amy Lawrence

up several more during the course of the year. The BI program also successfully completed its first summer program this year. Attendance during the six weeks fluctuated between 15 and 23, with each child having an adult partner for the session. It was a positive experience and brought a lot of activity to our campus for others to see. The BI's also had extensive training during the summer to meet the State Minimum Standards for the program. This program has also provided training to local schools in Therapeutic Options, a three day training.



LCC CYFS program and 11 other programs who participate in the Child Trauma Collaborative are presently involved with a federal research grant to improve treatment of children who have experienced trauma. The treatment model, called ARC (Attachment, Self-regulation, and Competency) was developed by Margaret Blaustein and associates. Margaret herself is providing consultation for this grant. The ARC model is complementing our efforts of the previous year to develop a systems approach treatment model for our families. Parents and children receive a stipend for completing objective measures of progress, and we have been able to use grant monies to assist in furnishing a sensory-motor treatment room (the SMART Room). Other in-service trainings about topics like domestic violence and teen drug use have also been presented throughout the year.



CYFS Senior Leadership Team,
Jessica Dambach, Carolyn
Aaronson, Lauren Johnson, Carol
Slayton, Cindy Olsen, Amy
Lawrence

Thank you for all that you do!

Children Youth and Family Services

It has been a challenging year for the Children Youth and Family Services (CYFS) Program. There have been a number of staffing changes, including a move from a Director based model to a collaborative management team-based model incorporating all children’s mental health programs. From the State level there has been increasing pressure on community partners to develop initiatives to serve area families in a holistic manner and result in economies of efficiency and efficacy.

The Early Childhood and Family Mental Health (ECFMH) program at LCC is part of a state pilot project for Children’s Integrated Services, which it is expected to be-



come a model for the larger state mandate of Integrated Family Services, now in the planning phases. ECFMH integrates with other early childhood programs in the area to provide services to families of children 0 to 6 years old. LCC staff provide play therapy, consulta-

tion to daycare centers, and quarterly trainings to providers and parents on early childhood mental health topics.

As of September 2010 LCC has several School Based Clinicians and School Wide Behaviorists in area schools. They provide assessments, counseling, groups and consultation services to the schools. The SBC’s are also available to make home and family connections to ensure the success of the student in school. The program has expanded this year to include working closely with Johnson State College and their counseling interns.

The LCC Behavioral Interventionist Program began the 2009/2010 school year with 24 BI contracts and picked

A special thank you to our sponsors who helped make Mental Health Awareness Month such a success for the Lamoille Valley; *Community Health Service of Lamoille Valley, Lamoille Home Health Hospice, Kittel, Branagan & Sargent, Poulos Insurance, Stackpole & French Law Firm, Johnson State College, United Way, Harvey Construction, Laraway Family Servcies, Sears of Morrisville, Manufacturing Solution, Inc., Morgan, Brown & Joy Law Firm, The Lamoille Family Center, Copley Hospital, CBA, Polow, Polow & Mahoney Law Firm, Lamoille Court Diversion and John M. Bissell Foundation, Inc*

Over the past year businesses and community members have given donations to Lamoille Community Connections in memory of a loved one, supporting a special program or wanting to have a positive impact on those we serve. Thank you for your support; *Dale McNight, Holly Russell, Vermont Foodbank, Knights of Columbus, Merchants Bank Foundation, Stackpole & French,, GW Tatro construction and for the many people in the community who gave anonymous donations.*

**Total People Served
July 2009—June 2010**

<u>Town</u>	<u>#Served</u>
Cambridge	42
Craftsbury	13
Eden/Eden Mills	89
Elmore/Elmore Lake	1
Hardwick/East Hardwick	95
Hyde Park/North Hyde Park	141
Jeffersonville	80
Johnson	180
Morrisville	536
Stowe	101
Waterville	17
Wolcott/North Wolcott	121
Unknown*	21
Out of County*	269
Total Served	1705

* unknown and out of County are people that are served by our Emergency Services that also cover Greensboro, Stannard and Woodbury.

A Message from the Executive Director



This is my first report as CEO of LCC. I became CEO in January 2010. Before that I held the joint positions of CFO/COO for the previous five years. Among the benefits of that experience was that it allowed me to develop a particular sensitivity to the need for aggressive fiscal prudence especially as we navigate these challenging times and constraints on our budgetary allocations.

Recognizing that the input of our community partners would be vital to the success of our Agency as it expands its services I spent a fair amount of time during the first three months of my becoming CEO getting to know our community partners. This process has already borne fruit as their feedback and comments, both of encouragement and criticism have resulted in a number of positive changes.

In addition to reaching outward to our community partners I initiated a process of internal restructuring. With the ultimate goal of having all staff capable of functioning as ambassadors of the agency, I decided on an increased effort on building teamwork and collaboration between our various programs. It must be borne in mind however that these and any other such initiatives will be subject to periodic review to ensure that their stated objectives are being met.

I would just to take a moment to highlight two are-

Legislators on behalf of their services. GATSA contributes to the community by donating to those in need during the Holiday Season.



LCC's DS Supported Employment Services assists individuals to achieve career and work goals by providing Employment Assessments, Employer and Job Development, Job Training and Ongoing Support to Maintain Employment. We currently have 45 consumers in the DS Supported Employment Program. The Supported Employment Program has continued to grow. Voc. Rehab has contracted with LCC this year to serve individuals that do not meet DS Eligibility.

Jennifer Stratton
DS Program Director



Developmental Services

Our mission is to provide person-centered disability, aging, and mental health services which promote self-directed, productive lives within the community. The types of services vary depending on individual needs.

Developmental Services provides Home and Community Based Waivers, Flexible Family Funding, Targeted Case Management, Bridge Program, and Choices for Care for the elderly.

Developmental Services has done some restructuring this year. We no longer have a separate Adult and Children team we just have one team. The team leader position has been eliminated, and we have 3 Senior Service Coordinator positions.



The self-advocacy group, GATSA, has ongoing trainings that they attend and present at. They have attended the Voices and Choices Conference in Burlington as well as the National Conference being held this year in Kansas City, Missouri. GATSA meets monthly with other Self Advocacy groups around the state to keep abreast of what other groups are doing. Our local GATSA group continues to have ongoing interaction with the State

as that are high on my list of priorities for the coming year. The first is to make sure that no effort is spared in making our internal processes function smoothly. This means in the first instance making sure that a work environment is created and sustained that is conducive to, and supportive of the best efforts of each member of our staff. In a period when we are being asked to do more with less an increase in the efficiency of our performance must make up for the new constraints on other material resources. Such an increase can best be achieved if staff is made to feel respected, wanted and vital to our achieving our goals of top-level service to our consumers and to the wider community. Secondly, as has been stated before, we must maintain the strongest and most honest relationship with our community partners. Their comments and criticisms are vital to the success of our project. Beginning with me, everybody at the agency needs to make a concerted effort to listen more carefully to what our partners in the field have to tell us.

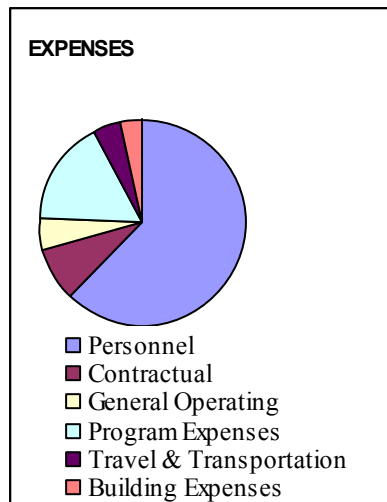
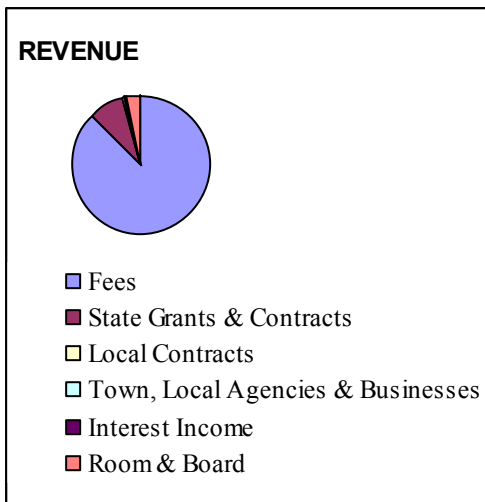
In closing, I wish to THANK our Board of Directors for their guidance and unwavering support. I appreciate and value your commitment in helping to guide our Agency through these difficult times. To our dedicated and talented staff I want to say a SPECIAL THANK YOU. The work you do has contributed to improving the quality of life for the most vulnerable members in our community. To you I extend my deepest gratitude. I would be remiss if I do not include a word of thanks to my predecessor. When it was all very new and daunting to me he was a source of encouragement and support. I, and the rest of the staff, continue to wish him well into the future.

Finally, I wish to reiterate my commitment to the mission and vision of our Agency, and to pledge to spare no effort in maintaining the highest level of service to our consumers and the highest level of support for our staff.

Respectfully Submitted,
Savi Van Sluytman, CEO



Revenues & Expenses FY 2010



REVENUE

Fees	10,741,741	87.48%
State Grants & Contracts	993,491	8.09%
Local Contracts	28,681	0.23%
Town, Local Agencies & Businesses	121,920	0.99%
Interest Income	1,318	0.01%
Room & Board	391,369	3.19%
TOTAL REVENUE	12,278,520	

EXPENSES

Personnel	7,342,478	62.12%
Contractual	990,744	8.38%
General Operating	608,634	5.15%
Program Expenses	1,964,992	16.62%
Travel & Transportation	528,343	4.47%
Building Expenses	384,775	3.26%
TOTAL EXPENSES	11,819,966	

Summary Statement of Financial Position

ASSETS	
Current Assets	
Cash	1,034,119
Accounts Receivable	769,387
Other Current Assets	63,119
Fixed Assets	1,765,445
Total Assets	3,632,070
LIABILITIES & FUND BALANCE	
Accounts Payable	1,165,386
Deferred Revenue	159,611
Fund Balance	2,307,073
Total Liabilities & Fund Balance	3,632,070

Emergency Services

Lamoille County Mental Health Emergency Services Program provides immediate crisis intervention for individuals, families and the community, 24 hours a day 7 days a week 365 days a year. The program covers all of Lamoille County and provides services for children and their families in Hardwick, Craftsbury, Greensboro, Stannard and Woodbury.

Services Provided

- Assessment, evaluation and referral services
- Incapacitation screenings
- Screenings and referral for voluntary and involuntary hospitalizations
- Consulting services for Copley Hospital
- LINK
- After hours CRT
- Access Program
- Critical Incident stress debriefings
- Support Services

For fiscal year 2010 Emergency Services had a total of 854 emergency contacts.

This resulted in:

- 27- Involuntary hospitalizations.
- 84- Voluntary hospitalizations
- 102- Incapacitation screenings
- 3- Community Critical incident stress debriefings
- 3- Trainings for Copley hospital staff
- 17- ACCESS case management cases ranging in duration of 3 – 12 months
- 23- ACCESS bed placements-resulting in 145 bed days.
- 24- Hospital diversion bed placements
- 18- Substance abuse program referrals

The balance of calls were referrals to Outpatient services both therapeutic and psychiatric, various screenings at schools, police departments and Copley hospital that did not result in any referral to the hospital or services, support calls, inter-agency assist calls and general information.

Goals for the coming year will be to continue efforts to realize the goal of creating crisis capacity here at the old clinic as well as a incapacitation program. To continue to work with other agencies, school systems and agency programs to develop comprehensive programs to better meet the needs of our community.

James Berry, Emergency Services Manager