

ADDISON COUNTY YOUTH IN TRANSITION PROJECT

Counseling Service of Addison County (CSAC)

89 Main Street

Middlebury, VT 05753

802-388-0302

Grant Number: 03150-5257

Project Period: 2/1/2009 thru 9/29/2009

Approval of Plan:

_____ (C. Huntley, Chair of LIT) _____ (Date)
_____ (R. Giddings, AHS Field Director) _____ (Date)

- **Description of regional vision**

Addison County Service Providers are proud that the greatest strength of our local service delivery system is our successful and effective collaboration practices that are intended to address systems issues, as well as to respond to individualized need. Coming together results in a continual review of presenting issues, in order to identify gaps, clarify roles, realize teaming options, conduct effective communication and promote interagency understanding. The ultimate goal is to implement possible intervention strategies.

There exists a strong commitment to effectively realize the benefits from participation on our Local Interagency Team (LIT), in addition to other collaborative venues. Providers, including but certainly are not limited to: Addison County schools, Vocational Rehabilitation, Parent Child Center (PCC), Counseling Service of Addison County (CSAC), Department of Children and Families (DCF), and Economic Services, routinely come together, setting aside individual interests, in order to develop intervention strategies to attend to meeting the needs of our community – regardless of whether the issue may be county-wide or solely how to best meet the needs of an individual.

A reoccurring theme, mandating attention, is the gap of how to address the needs of transitional aged Youth with Severe Emotional Disturbance. It is commonplace that this population does not have the adequate preparation or the necessary supports to be productively engaged in their community. This reality results in not only an increased involvement in the criminal justice system but extends to all components of daily living. They report to us that they require assistance with accessing health care (including treatment for mental health and co-occurring substance abuse disorders) and financial benefits; in transitioning into “adult services”; in graduating high school and accessing post secondary educational opportunities, in securing and maintaining employment, in establishing and preserving safe and stable housing; in receiving advocacy within the legal system; and in the establishment and nurturing of caring, supportive relationships.

The act of coming together as a community to discuss strategies to address the needs of Youth resulted in the identification of the need for a point of contact, one who has a broad knowledge of our local service delivery system, and one who can provide case management and life skill supports. Coordination among agencies and schools and any intersection points allow for multiple doors and referral sources. A primary goal will be to aim for the service provider community to look to a collaborative process driven by youth needs, voice and participation.

Youth, individuals between the ages of 16-21, with Severe Emotional Disturbance are an underserved population. There are many reasons for this, but the kind of services and the manner in which available services are offered to them is essential for their success. We have learned that offering services to this population must be achieved in a context acceptable to these youth – one that is nonjudgmental or places them in fear of criticism.

It is the practice to transition youth to eligible services such as CRT, Developmental Services, VR and the JOBS program. However, admission criteria for each of these programs are different and for some, do not meet all the identified needs of the referred Youth. For many children serviced in Addison County, there is not a viable program,

service, or system of care to which to transition youth with serious mental health issues compounded by the need for support in daily living.

Youth served in Addison County demonstrate a wide diversity of needs. However, it is unclear of how many Youths may require this service as some are likely not known to us as a system; it is a goal of the proposed service to outreach to these individuals. Some Youth are in or recently released from DCF custody, have current or past experiences with special educational services, are current or prior clients of Vocational Rehabilitation, and might have experience within the Juvenile Justice or Adult Court systems, but many more Youth are not served by any current system of care. One of the keys to success for youth will be assuring a set of services which provides developmentally appropriate outreach-oriented case management. For some Youth, an existing service may very well meet their current need. However, for other Youth between the ages of 16-21, there does not exist a service that has the capability to address the complexity of combined needs. Youth aging out of school are more likely to become homeless, have low high school graduation rates, are more likely to be unemployed and more likely to be incarcerated or use substances. They are more likely to be parents at an early age. Their needs mandate services. Again, potential needs to address may include comprehensive health, mental health, and substance abuse treatment; comprehensive housing services; vocational and educational supports; and supportive wraparound case management. Needs to be identified for Youth at key intercept points.

One of the keys to success for youth will be assuring supportive relationships. Ideally, youth will develop those relationships earlier in life through natural connections in the community and within extended family. However, for those that are not able to do so, there must be some capacity for youth to receive continued support through a youth development worker.

Currently, everyone in the system looks at age 18 or high school graduation day, as a day of transition. It is seen as this magical day when youth will be free of state controls – and state supports. Too many youth are not prepared for that day of transition.

Our goal must be to change this overall norm and to, instead, promote smooth and successful transitions. The focus must be on plans to help youth succeed, not on ending services. As is true for all youth, we must support a gradual transition, urging greater independence, but also providing guidance and tangible supports through the transition.

A second goal is to better engage youth in planning for themselves, as well as better utilizing the voice of Youth in Addison County’s planning processes for the implementation of services.

- **Description of the services already in place for behavioral health treatment for Youth in Transition (aged 16-21, inclusive, and their families) with severe emotional disturbance, especially those who are out of school**

Transition-aged youth have long been a priority for Addison County as defined in our System of Care Plans for the last few years and in past efforts to strengthen the system and our local resources. Approximately 5 years ago, the community worked together through an interagency/school group called the Youth Services Council (modeled after the Early Childhood Councils). At that time, a grid was developed to identify existing services and recognize gaps.

Adolescent Services in Addison County

	Food	Housing	Jobs	Education	Crisis Services	Mental Health Counseling	Youth Leadership
Ages 12 – 18	-Food stamps if independent -Food Shelf -PCC Lunch Program -Community lunch and supper programs	-Shelter available for 14 days – VCRHYP \$ -Respite— CSAC and DCF - John Graham Shelter	-VR if a disability- Keeping jobs- Skills and supports -JOBS Program— age 16-22 -Job Corp - Addison County Job Coalition	-Schools -Parent/Child Center -Champlain Valley Academy -VT Adult Learning -CCV -Jobcorps	CSAC, Women Safe, Police, Emergency Room, DCF	CSAC, PCC, Schools, Private, Rape crisis, Hospital screening	PACT, Schools, Boys & Girls Club, Teen Centers Organized youth groups, 4H, Scouts

			- Schools Vocational Centers				
DCF Custody	Foster care stipend (and independent living stipend) covers money for food and clothing	Housing \$ for apartment possible-Chafee \$ Voluntary continuation of support after age 18	Casework support/refer rals Youth Development Coordinator VR JOBS Job corps	same as above	24-hour response. In addition to above	Social workers, in addition to above	Same as above
18 – 21 Years	Same as 12-18	-TANF if pregnant -Elm Street first time renters program	Same as 12-18	VSAC in addition to 12-18	Same as 12-18	Same as 12-18	Same as 12-18

Adolescent Services in Addison County continued:

	Health Care	Legal	Transition Planning	Recreation	Prevention	Substance Abuse Tx
Ages 12 – 18	STD's, Pregnancy , Rape crisis are special age-related concerns — (insurance can determine access) Open Door Clinic	-Court Diversion -Court System	-Schools -VR -DCF -PCC -CSAC	-Teen Centers— Middlebury, Vergennes, Bristol	-Health Dept, -SAP's, -PCC	-CSAC -Turning Points - Recovery Center -AA/NA -Private Providers
DCF Custody	Medicaid	-Guardian ad litem -Child's attorney -Probation -Family court process -Street checker	Youth Development Coordinator and same as above	Same as above	Same as above	Same as above
18 – 21 Years	same as 12-18	same as 12-18	same as 12-18	same as 12-18	same as 12-18	same as 12-18

The good news is that there have been significant improvements in our System of Care since the initial grid was completed. At the time, the lack of a JOBS program was a major concern and the concurrent lack of case management resources. Housing was a key issue and Teen Centers were struggling to exist and form. Educational programs for high needs youth were also an issue. There was recognition of the impact of lack of health insurance for this population. Continued problems exist today with the variation in service options as defined by the type of Medicaid a youth is eligible for—traditional Medicaid vs. VHAP.

The following summarizes the recent gains in our local system:

1. JOBS Program—Addison County began our JOBS Program in 2003 and has successfully met program outcomes each year.
2. Addison County received Transitional Living Program funding through the Vermont Coalition of Runaway and Homeless Youth Programs in addition to our Basic Center VCRHYP funds at CSAC. In order to create the best access to services, TLP funds are received by the Parent/Child Center.
3. Elm Street First Time Renters House provides not only stable housing for transition aged youth but also the opportunity to learn skills to support life-long stable housing
4. Champlain Valley Academy—in collaboration with local school districts, CSAC began an education/treatment program for middle and high school youth with significant emotional/behavioral needs.
5. Teen Centers—Currently the three largest towns in this area—Middlebury, Vergennes and Bristol---all have functioning Teen Centers.
6. Turning Point—a recovery center for youth and adults struggling with substance use and addiction issues.

As Addison County works to strengthen our System of Care with the help of this Transition Grant, the community is committed to broader use of collaborative teaming using a format like the Coordinated Services Plans (264 meetings as they are still known in Addison County). This process has worked well for us and yet, we realized that we

have used it less with the Transition –Aged population than with younger children. We would, therefore, hope to broaden the use of this teaming process. Done well, it can be an inclusive process that is youth directed and results in individualized plans.

- **Statement of remaining unmet needs (gap between the regional vision and the current situation/services)**

Addison County was fortunate to have the benefit of a large number of participating Youth in the development its regional plan. Following is a bulleted list of events where participation was achieved as well as the summary of the data collected.

- Addison County professionals and Youth attended the Working With Youth Conference
- Community wide meeting held on May 21, 2009 (panel participation of 12 youth and 1 parent). Attendees approximately 40 service professionals.
- Community wide meeting held on June 1, 2009 (panel participation of 12 youth and one parent) Attendees approximately 30 service professionals.
- July 1, 2009, State conducted a Youth Evaluation group meeting in Addison County at which approximately 20 Addison Youth participated

Living Situation, identified top three gap areas:

- ✓ Health Care
- ✓ Homelessness
- ✓ Emotional Support

Legal / Prevention, identified top three gap areas:

- ✓ How to connect with “discontinued youth, how to feel welcome
- ✓ Use of Court Diversion more than once
- ✓ Legal system to offer/refer for SA services, how to pay? Medical insurance?

Educational Opportunities, identified top three gap areas:

- ✓ Need consequences that make sense (not sending kids home when they want that)
- ✓ Info on what you can do without going to college
- ✓ \$ for drivers license classes – more clarity for available resources and more \$

Healthy Behaviors, identified top three gap areas:

- ✓ Need to address long term supports for MH and SA
- ✓ Need to create no wrong door with multiple entry point
- ✓ Need education of how benefits change at age 18

Employment, Career, Community, identified top three gap areas:

- ✓ Lack of job training
- ✓ No experience, no job
- ✓ No transportation

With the awarded SAMHSA dollars, in order to address the above identified gaps, Addison County intends to:

1. Throughout the planning process, Addison County’s participating “Youth” have requested to be referred to as “Young Adults”, not “Youth” as identified in this grant process. Upon implementation, this reference will go into effect.
2. Hire a part –time Peer Outreach Worker to be a voice and support for youth throughout the work of this grant. See attached Job Description.
3. Identify, establish and utilize a Youth Advisory Board whose primary role will be to work with the Addison County LIT in order to further develop an appropriate System of Care for this population. Stipends to be made available to support Youth participation. It was felt that youth will have a stronger voice if they have their own forum rather than being subsumed into an adult providers group. The Advisory Board will work in a consultation/parallel way to the Youth Services Council (to be described later). The Peer Outreach Worker will coordinate and facilitate this Board.

The mission of the Youth Advisory Board shall be authored by the participating Youth but shall be suggested to include the following:

- Guiding the LIT Team in Increasing Awareness and Reducing Stigma by promoting and marketing youth involvement, what it is, how to do it, and what the benefits of youth involvement are for other youth, service providers and the community

Additional responsibilities shall include:

- ❖ The utilization of youth as trainers or presenters to teach students/service professionals what is important and how they feel.
 - ❖ Include youth advocates at team meetings to support and assist youth in the process. These will be youth/peer advocates rather than adults. Their roles can include meeting with the youth prior and helping prepare them for the team meeting and/or participation in team meetings.
 - ❖ Maintain a consistent inclusion of the voice of Youth in defining the direction of service delivery.
4. Collaborate with the current System of Care by recruiting and hiring a dedicated Full time “Youth Advocate” in order to provide a tangible, familiar connection and/or case management service for Youth (ages 16-21 years of age). See attached Job Description. This action will assist in the design of a beneficial modification to Addison County’s “System of Care” that specifically addresses Youth in Transition, ages 16-21 with severe emotional disturbance. Furthermore, this action shall result in the coordination of providers at key intersection points and make use of the literature on evidence-based practices.

Primary job function will include:

- ❖ Working with individual youths to identify a “Team” and to build a Coordinated Service Plan that addresses their expressed and revealed individualized needs. This may involve services through the Counseling Service, the Parent/Child Center or any number of community resources—

both formal and informal in nature. This planning process has been very effective in this community for younger children and we would like to expand the use of the model to Transition-aged youth.

- ❖ Conducting Outreach to Youth.
 - ❖ Effectively utilize contracted peer supports from the Youth Advisory Board.
 - ❖ Educate our community on the role and associated benefits of the Peer Support staff.
 - ❖ Schedule and facilitate, when appropriate, service provider team meetings, modeling the 264 process. Strengthen coordination at key intercept points.
 - ❖ Identification and referral to community resources.
 - ❖ Maintain a caseload of a minimum of 15 Youth for a period of not longer than one year.
5. As part of the grant effort, this community will rebuild the Youth Services Council—a group that existed for some time in this area to address the systemic issues in working with adolescents. The Youth Services Council will bring together social service providers, schools, families, and community members to both work on the implementation and development of a system of care for Transition-aged Youth and to look at prevention and the continuum of services for younger adolescents as well. The group will work in tandem and in collaboration with the Youth Advisory Board and be organized as a subcommittee of the LIT Team. The Youth Services Council will report to the LIT Team monthly. There is a large percentage of overlapping membership on LIT and Youth Services which will also facilitate collaboration. The Youth Services Council may also

have a portion of the meeting devoted to providers and a clinical supervision model to explore effective intervention practices with the population and to extrapolate the systems issues that are identified in individual work with youth.

6. To infuse cultural and linguistic competence into the key human services systems and programs within Addison County. The Youth Advocate, in conjunction with representation from the Youth Advisory Board will advocate for the:

- ❖ Design of services and supports to meet the needs of culturally and linguistically diverse groups (e.g., family driven and community-based; flexible times, service hours; language access services; culturally-based advocacy, non traditional therapeutic practice, culture-specific assessments, and interventions and treatment)
- ❖ Conduct training on the use of appropriate strategies to address barriers to the design and delivery of interventions, services, and supports (e.g., staff attitude and manner, service hours, service location, language, insurance, lack of awareness about systems of care principles and practices including failure to consider family, lack of knowledge about diverse cultural groups, fear and distrust of the service system, stigma associated with social-emotional and behavioral disorders or mental illness)
- ❖ Utilize outreach, specifically with the support of the Youth Advisory Board, to eliminate racial and ethnic disparities among other youth experiencing social-emotional and behavioral disorders or mental illness
- ❖ Evaluates the quality of outreach, interventions, services, and supports by incorporating (into the 264 model) the use of family and youth satisfaction surveys.

7. Create the ability to provide County wide training opportunities to service providers. Initial topics of interest include, but are not limited to:
 - ✓ Supporting Life Long Connections
 - ✓ How to act/perform as a Youth Advisor
 - ✓ Advocacy Training for Youth – How to partner with providers.
 - ✓ Co-Occurring Disorders
 - ✓ Substance Abuse
 - ✓ The use of Cultural and Linguistic Competence in Service Delivery
 - ✓ Motivational Interviewing Skills.

8. Create a pool of available dollars to meet the needs of Youth that are not able to be funded from other sources. This capability will be monitored by the supervising group and include an application process. The contracted position of the Peer Support shall have a voice in authorizing requests.

Our local community wide meetings were largely represented by the Youth of Addison County. Below is an incomplete list of challenges that they wish to consideration of financial support with. This aspect of the grant was of high importance to them.

- Assistance with drivers education courses
- Assistance with expenses related to driving / car repair
- Assistance with expenses related to child care
- Assistance with expenses related to unexpected housing costs
- Assistance with legal expenses
- Assistance with medical co pay when hardship results
- Other

- **Desired outcomes and possible indicators**

Outcome #1: Youth are engaged in planning for their future.

Indicator #1: 75% of participating Youth, identified in caseload, will choose to actively engage and participate in a coordinated service plan.

Outcome #2: At point of exit of service, Youth will be actively enrolled in high school, alternative educational plans, vocational training, college or an employer paid position.

Indicator #2: 60% of Youth will be actively engaged in positive future planning, as outlined above.

Outcome #3: Youth have safe and stable housing

Indicator #3: 70% of Youth identified as being homeless or couch surfing shall secure safe and stable housing.

Outcome #4: Youth have at least one supportive permanent relationship

Indicator #4: 90% of Participating Youth will have a place to go for the Thanksgiving holiday.

Outcome #5: Youth are free from incarceration

Indicator #5: Court system and Court Diversion will be educated on this service and will be encouraged to utilize referral for Youth in jeopardy of incarceration. 65% of referred Youth will remain incident free while enrolled in this service.

Outcome #6: Youth have health care coverage

Indicator #6: 75% of participating Youth will agree to accept referral and assistance in applying for health care benefits. Youth will receive assistance and advocacy in choosing and being accepted by a primary care provider.

Outcome #7: Adults working with youth are skilled at working with adolescents.

Outcome #7: This project shall provide County wide trainings to service professionals.

Outcome #8: Addison County Youth Services Council shall be revitalized.

Outcome #8: Council members will be partly responsible for the local System of Care Plan development for the YIT population. In achieving this, they shall review and utilize County data pertaining to community profile data, county homelessness data and JOBS data.

Outcome #9: Data collection, pertaining to YIT in for Addison County, will be improved.

Outcome #9: Evaluation reports shall include numbers of contacts as well as data associated with caseload.

- **Description of priority services / strategies, including interagency agreements and methods for responsiveness to youth and families, public outreach, training for implementation, etc.**

- ✓ This proposal, by allowing for the hiring of both a Youth Advocate and a Peer Outreach Worker, expands upon Addison County's capacity to provide behavioral health treatment for youth in transition (aged 16-21, inclusive, and their families) with severe emotional disturbance who are both in and out of school. For those out of school and potentially separated from the service provider community, utilizing a street outreach model will intentionally provide opportunity for engagement and the building of trusting relationships. Furthermore, the opportunity for follow up will be enhanced as connections will extend beyond office based practices.
- ✓ For this population, this will be a new service thus being non-duplicative of existing resources.

- ✓ As this is a community collaborative project, we anticipate the spreading by “word of mouth” to have great impact on the understanding that this new service is available. Literature and educational opportunities shall be provided to all intercept point staff in order to facilitate an understanding and the referral process to this service.
 - ✓ Collaborative partner websites shall include a description of the service.
 - ✓ Newsletters and mailings shall include an article outlining the service.
 - ✓ Schools and drop in centers will be requested to post information flyers.
 - ✓ Conducted outreach to the Court system, economic services, and doctor offices will occur.
 - ✓ Local newspapers will receive notification for publication.
- **Management Structure, fiscal agent and contact people (for administration and evaluation of the grant)**

The Steering Committee has agreed that The Counseling Service of Addison County, Inc. will act as fiscal agent for the grant. LIT and Youth Advisory shall commit to their supervisory role throughout the grant period. All collaborating partners are ready and prepared to initiate implementation immediately. The grant will be administered by the CSAC Youth and Family Division, under the supervision of Program Director Cheryl Huntley. Contact information (both administrative and evaluation):

The budget is attached. CSAC intends to add one day of funding through fee-for service Medicaid to the Youth Advocate position allowing it to be a full time position with benefits.

Cheryl Huntley 802-388-0302, ex 493, chuntley@csac-vt.org

- **Project budget summary with line item details**

CATEGORIES	BUDGETED	DESCRIPTION
Personnel Salaries & Benefits	\$42147	YOUTH ADVOCATE 1 FTE (30 HRS/WK) BASE SALARY: \$31220 FRINGE 35%: \$10927
Consultant	\$3744	PEER SUPPORT 6 HOURS/WK @\$12/HR
Consultants	\$720	PEER ADVISORY 6 TIMES PER YEAR

		FOR 2 HOURS FOR 5 INDIVIDUALS @ \$12/HR
Travel	\$2140	100 miles per week @ .45 / mile
Office Expenses	\$750	Phone, computer, other supplies
Training budget	\$3600	6 trainings per year @ \$600, all inclusive
Miscellaneous fund	\$5000	To address individual needs
Indirect	\$14525	25% Includes supervision structure, Agency Admin, facilities, etc.
TOTAL	\$72626	As Addison County money is \$68767.50, CSAC to provide in kind of \$3858.50.
REQUESTED FUNDS	\$68,767.50	