

## **Department of Mental Health (DMH)**

### **Children's Mental Health HCBS Remediation Plan**

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This document represents the DMH's improvement and action steps to strengthen Vermont's Enhanced Family Treatment (children's mental health) home and community-based services system. It was developed as part of the State's systemic assessment of the alignment of Enhanced Family Treatment (EFT) with recent federal Home and Community Based Services standards related to person-centered planning and home and community based settings.

#### **Planning activities:**

- A review of policies and rules governing EFT operations (*Children's Enhanced Family Treatment Services Comprehensive Quality Strategy Systemic Assessment Home- and Community-Based Services (Pacific Health Policy Group, February 2016)*).
- Presentation of the HCBS regulations and timeline for Vermont's *Comprehensive Quality Strategy* to the Children's Act 264 Advisory Board (Sept 2016) and Children's Mental Health State Standing Committee (Sept 2016).
- Distribution of and a solicitation for input on alignment findings and draft Remediation Plan (Oct-Dec 2016)
- Presentation of the alignment findings and draft Remediation Plan at the Children's Act 264 Advisory Board (Oct 2016) and Children's Mental Health State Standing Committee (Oct 2016).
- Posting of the alignment findings and draft Remediation Plan to the DMH and DVHA websites (Dec 1, 2016)
- Review of input and adjustments to the alignment findings and Remediation Plan (Jan 2017).

The primary lead for Enhanced Family Treatment proposed improvements/actions steps rests with the Department of Mental Health (DMH). All improvements/actions steps will be managed in collaboration with program stakeholders, the Vermont Agency of Human

Services (AHS) and the Department of VT Health Access (DVHA). The remediation plan will commence in January 2017 and is anticipated to be complete by June 2017.

**Areas for Remediation identified in the alignment report:**

**Enhanced Family Treatment**

Regulation: Settings Requirements	Findings	Proposed Improvements/Action Steps
<p>14 (b) Document the positive interventions and supports used prior to any modifications to the person-centered service plan</p>	<p style="text-align: center;">Partial Alignment</p> <p>DMH standards require evidenced-based, trauma informed care that is built on individual strengths and preferences. Additionally, the children’s mental health program includes incentives for school based work provided in schools that employ positive behavioral support practices. However, there is no explicit guidance regarding positive behavioral support as a minimum practice standard.</p>	<ul style="list-style-type: none"> <li>a. DMH to update the Enhanced Family Treatment Manual, (section 2, page 16 <a href="http://mentalhealth.vermont.gov/sites/dmh/files/forms/CAFU/Enhance%20Family%20Treatment%20Manual_Jan2016_protected.doc">http://mentalhealth.vermont.gov/sites/dmh/files/forms/CAFU/Enhance%20Family%20Treatment%20Manual_Jan2016_protected.doc</a>).</li> <li>b. DMH to update the Children’s mental health <b>Minimum Standards</b> chart review form to address regulatory requirements (section III, page 8 <a href="http://mentalhealth.vermont.gov/sites/dmh/files/policies/CAFU/CAFU_Chart_Review_Final_0816.pdf">http://mentalhealth.vermont.gov/sites/dmh/files/policies/CAFU/CAFU_Chart_Review_Final_0816.pdf</a>)</li> <li>c. DMH to solicit stakeholder feedback on updated documents.</li> <li>d. DMH to incorporate feedback into documents in January 2017.</li> <li>e. DMH to publish revised documents and distribute to stakeholders by February 2017.</li> <li>f. DMH to provide training and technical assistance to providers and stakeholders as needed.</li> <li>g. AHS &amp; DMH to evaluate results of the Site Specific Settings Assessment.</li> </ul>

Regulation: Person-Centered Planning	Findings	Proposed Improvements/Action Steps
<p>5. Includes strategies for solving conflict or disagreement within the process, including clear conflict-of-interest guidelines for all planning participants</p>	<p style="text-align: center;">Partial Alignment</p> <p>Guidance do not include Conflict of Interest policies</p> <ul style="list-style-type: none"> <li>• The EFT grievance and appeal process requires adherence to Medicaid Managed Care grievance and appeal rules under the GC demonstration.</li> <li>• DCF Residential Licensing Regulations provide for complaint and grievance processes and written documentation that the child and family have received information regarding the process and how to request advocacy and other support for reporting and resolving complaints.</li> </ul>	<ul style="list-style-type: none"> <li>a. DMH to add language to EFT manual for grievance/appeal of person-centered plan, acknowledge potential conflict of interest and refer to G&amp;A manual (section I, page 8 <a href="http://mentalhealth.vermont.gov/sites/dmh/files/About/GA/GA_Manual_7-2016%20.pdf">http://mentalhealth.vermont.gov/sites/dmh/files/About/GA/GA_Manual_7-2016%20.pdf</a>).</li> <li>b. DMH to solicit stakeholder feedback on updated documents.</li> <li>c. DMH to incorporate feedback into documents in January 2017.</li> <li>d. DMH to publish revised documents and distribute to stakeholders by February 2017.</li> <li>e. Remediation for conflict of interest is addressed in remediation steps for #6 below</li> </ul>

Regulation: Person-Centered Planning	Findings	Proposed Improvements/Action Steps
<p>6. Providers of HCBS for the individual, or those who have an interest in or are employed by a provider of HCBS for the individual must not provide case management or develop the person-centered service plan, except when the State demonstrates that the only willing and qualified entity to provide case management and/or develop person-centered service plans in a geographic area also provides HCBS. In these cases, the State must devise conflict of interest protections including separation of entity and provider functions within provider entities, which must be approved by CMS. Individuals must be</p>	<p style="text-align: center;">Partial Alignment</p> <p>Guidance do not include Conflict of Interest policies</p> <ul style="list-style-type: none"> <li>• VT Statute provides for the designation and certification of Mental Health Agencies to serve specific geographic regions of the State or to provide specialized support to specific populations. Participants may choose where to receive their services from among approved providers.</li> <li>• Participants choosing out of home services receive case management from a host agency. The host agency is responsible for facilitating an acceptable match of foster home setting, contracting with the home provider on the child and family's behalf, and developing the treatment plan. The host agency is responsible for oversight of the treatment plan and following up on any child or family concerns with the home, plan, or other service providers.</li> </ul>	<ol style="list-style-type: none"> <li>a. DMH to update the Enhanced Family Treatment Manual regarding conflict-free case management, (section 2, page 16 <a href="http://mentalhealth.vermont.gov/sites/dmh/files/forms/CAFU/Enhance%20Family%20Treatment%20Manual_Jan2016_protected.doc">http://mentalhealth.vermont.gov/sites/dmh/files/forms/CAFU/Enhance%20Family%20Treatment%20Manual_Jan2016_protected.doc</a>)).</li> <li>b. DMH to solicit stakeholder feedback on updated documents.</li> <li>c. DMH to incorporate feedback into documents in January 2017.</li> <li>d. DMH to publish revised documents and distribute to stakeholders by February 2017.</li> </ol>

Regulation: Person-Centered Planning	Findings	Proposed Improvements/Action Steps
<p>provided with a clear and accessible alternative dispute resolution process</p>	<ul style="list-style-type: none"> <li>The EFT grievance and appeal process requires adherence to Medicaid Managed Care grievance and appeal rules under the GC demonstration.</li> </ul>	