



**HOWARD
CENTER**
Help is here.

FY23 OUTCOMES REPORT



7/1/2022 – 6/30/2023



About Howard Center

HOW WE HELP

Howard Center has a long and rich history as a trusted provider in our community. With a legacy spanning more than 150 years, Howard Center has been providing progressive, compassionate, high-quality care, support, and treatment for members of our community in need. Founded in 1865 as an agency serving destitute children, it now offers mental health, substance use, and developmental disability services across the lifespan.

Our staff of 1,500 provides help and support in over 60 locations throughout Vermont. More than 19,000* clients and community members turn to us each year for help to lead healthier and more fulfilling lives.

MISSION We help people and communities thrive by providing supports and services to address mental health, substance use, and developmental needs.

VISION Howard Center is a national leader in the delivery of integrated and seamless community-based supports for individuals, families, and communities in need. [Help is here.](#)

- VALUES**
- Clients are at the heart of our decision making.
 - We are committed to individual and collective well-being and success.
 - We are responsible stewards of the resources entrusted to us.
 - We are steadfast in our practice and pursuit of excellence.

HOWARD CENTER OUTCOMES

Thank you for your interest in our work. In the following pages, you will find information based on the Results Based Accountability™ (RBA) model and the subsequent Vermont Bill S.293, “An act relating to reporting on population-level outcomes and indicators and on program level performance measures.” Using the RBA model, data for each program is organized to address the following questions:

HOW MUCH DID WE DO?

Each program page provides information about how many clients received services, types of services provided, and general program descriptions. Information in this category provides an overview of the individuals served and the services provided.

HOW WELL DID WE DO IT?

Data that illustrates the quality of programs, such as individual perception of our quality, external ratings of program quality, staff information, and examples of evidenced-based models are available in each program report.

ARE WE BETTER OFF?

We are often asked how effective our programs are at improving the lives of those we serve. This is a complex question because nearly all people we support are involved in a variety of services. We strive to make significant contributions to improving the circumstances that bring individuals to Howard Center. Given this, each program page includes information about individual perception of effectiveness and, when available, other ratings that point to the impact of our services.



**This number includes individuals enrolled as clients and an estimate of other community members supported.*

Letter from the CEO

Dear Clients, Friends, Partners, and Supporters:

It is a somewhat bittersweet honor to present the Outcomes Report for FY23. It is the ninth, and my last, such report that I have had the privilege of introducing during my tenure as the agency's CEO.

As in previous years, this report documents the important work being done by our professional and dedicated staff, as they contribute to make our community a stronger and healthier place for all. Even as the demand for services are great, our agency and staff are committed to ensuring that all community members get the help they need when they need it.

The report also highlights the continuing need for mental health, substance use, and developmental services for so many individuals and families in our community. During my 30-year career with the agency, I have come to understand and appreciate that community partnerships are a necessary component in addressing and solving community needs. Each individual and organization has a key role to play as we work together to create a healthier community. I am proud to have had a role in that effort in my years with Howard Center, and I thank our clients, staff, board members, supporters, and numerous community organizations for the opportunity to work together toward our shared vision to build a more inclusive and supportive community.

Regards,



Bob Bick, *Chief Executive Officer*



FY23 Outcomes Evaluation Project

Matthew MacNeil, Ed.D., LCMHC,
Director of Evaluation and Outcomes

This report was compiled by Howard Center's Development and Communications team with support from Information Technology.



*Our annual report is available by request.
Email developmentteam@howardcenter.org.*

Editor's Note: Some program names changed in FY24 and we refer to them in this report by their updated names.

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* *This list represents our board for FY23.*

Understanding This Report

Below is our service category icon key which provides a consistent visual theme throughout the report. Some programs relate to a single service category and some span several service categories. The larger icon generally means this service is most relevant and the smaller icons represent secondary services. Icons can be found in the upper right-hand corner of each page.



Community Support Services

Our community support and employment programs offer a variety of services that help children, youth, adults, and families participate more fully in their community. Through these programs, clients develop the skills and confidence to pursue their interests for enjoyment and employment.



Crisis Services

Our crisis programs provide timely crisis intervention and evaluation services 24/7/365 days a year to children, adolescents, and adults — and their support systems — who are experiencing a mental health or substance use crisis.



Educational Services

Our educational programs are designed to prepare each student, regardless of age, to live independently. A common goal of all our educational programs is to help students develop their unique strengths and learn new skills that will help them achieve independence and lead fulfilling lives.



Outpatient Services

Our outpatient programs provide therapeutic counseling and supportive care management for Chittenden County children, adolescents, adults, and families in individual and group settings for individuals with mental health and/or substance use issues.



Residential Services

Our residential services support people in many different types of living situations to accommodate individual needs and preferences, including apartments, group homes, therapeutic community residences, shared living options, and other innovative living models.



Substance Use Services

Our substance use services vary in length and intensity from short- to long-term recovery support programs. Services include therapeutic counseling, harm reduction, recovery support, crisis, and medications for opioid use disorder.

OTHER NOTES:

Community Partners: We list community partners throughout this publication, defined for this purpose as community service providers, first responders, municipalities, state administration departments, law enforcement agencies, legislators, non-profit organizations, colleges and universities, private and publicly-funded agencies, businesses, and others.

Quotes: The quotes in this report rarely include identifying information because maintaining client confidentiality and privacy is at the heart of everything we do.

Overview highlights and notables: The right-hand sidebar includes a variety of additional information selected by each program to provide the reader with relevant information and demonstrate impact.

Community Education FY23

FREE AND OPEN TO THE PUBLIC

By the Numbers



WHAT PEOPLE ARE SAYING:

“The presenters were real, relatable, and had important backgrounds and experiences to share.”

“Thoughtful, informative, easy access”

“I loved the presentation. It very much resonated with some of the struggles I have been having lately.”

“Great film. Great speakers. Super important topic.”

2015-2023 STATS

4,101
total attendees

137
experts in the field presented

91%
reported they learned something from attending

89%
would recommend the presentations to others

77
average attendees per session

53
total sessions

In 2015, Howard Center began offering a free and open to the public, spring and fall community education series as part of our mission and service to the community. The sessions included presentations, panel discussions, and film screenings, followed by rich conversations. Subject matter experts, service providers, and community members with lived experience gave presentations on topics such as the opioid epidemic, trauma, suicide risk and prevention, autism, mental illness and recovery, and peer support.

Our community education series emphasizes our commitment to our community by helping to educate, inform, reduce stigma, and increase awareness about a variety of health-related topics. We recognize that through a more complete understanding of health challenges, we can help shape a more compassionate and engaged community. Presentations are videotaped and available at www.howardcenter.org.

The spring session of the Community Education Series and our World Mental Health Day event were offered via Zoom webinar. Our annual conference was offered in-person at the DoubleTree by Hilton Burlington Vermont and via Zoom webinar.

FY23 SERIES HIGHLIGHTS (CES AND WMHD COMBINED)

3
sessions

WMHD
Our third World Mental Health Day (WMHD) event was in the Fall of 2022.

311
attendees

89%
of participants responding to survey learned something.

1
nationally-recognized speaker

81%
of participants responding to survey would recommend the presentation to others.

Annual Conference FY23

BREAKING BARRIERS

6TH ANNUAL CONFERENCE

BREAKING BARRIERS

Finding Purpose & Possibilities Together

April 19, 2023 | 8:30am-4:30pm

With international speakers

- Nadine Burke Harris
- Dacher Keltner
- BJ Miller
- Jeffrey Swanson
- Anna Malaika Tubbs

LEARN MORE



“It was outstanding, what an amazing line up of speakers, each one better than the next. Each topic was so engaging and dynamic.”

“The whole conference was well organized and incredible top-notch speakers.”

“Everything! Just excellent. The set up of the facility, the flow of the day, the exceptional panel! Every one of them! And the cookies, of course.”

“Speakers were top notch. Topics so relevant to being able to problem-solve huge issues in our communities across the life span. Love the speakers’ use of stories in their presentations.”

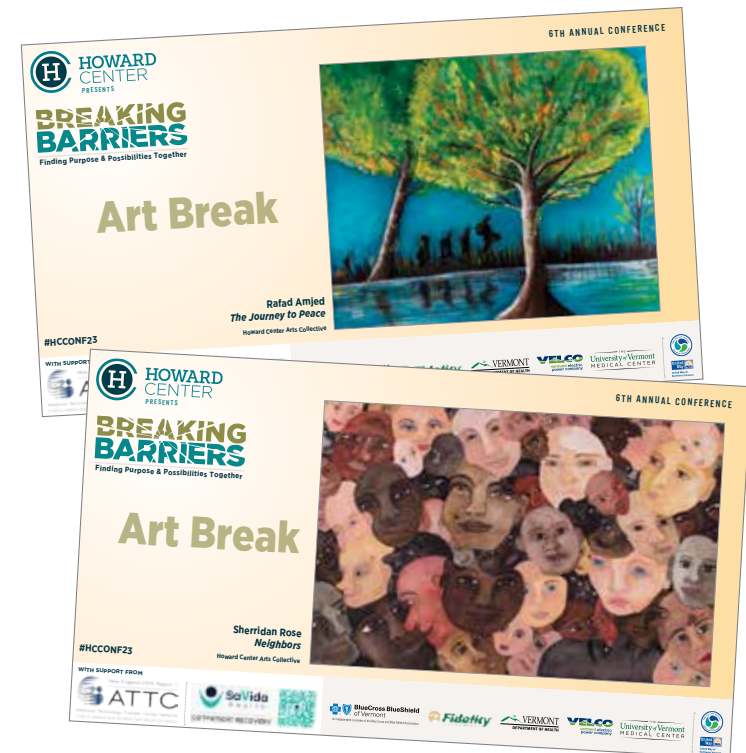
“I love the focus and intention to bring in diverse voices and experiences, amplifying important voices.”

567 attendees

97% reported that they learned something relevant to their work.

Overall Satisfaction Score of **9.54**, based on a scale of 1-10, 10 being the highest.

Average Recommendation Score of **9.52**, based on a scale of 1-10, 10 being the highest.



Howard Center Overview



19,000 INDIVIDUALS SUPPORTED IN FY23

PROGRAM DESCRIPTION

Our mission is to help people and communities thrive by providing supports and services to address mental health, substance use, and developmental needs.

PERFORMANCE MEASURES

HOW MUCH

- **10,900 individuals** are enrolled as clients and an estimated **8,000+** additional, community members were supported.
- **2,722** new clients.
- Howard Center operates **60+ locations** across the state.
- Howard Center provided **10,573,122 service hours**.

HOW WELL

- **91%** of clients reported they **received the help they needed**.
- **89%** of clients reported that the **services they received were right for them**.
- **96%** of clients reported that **staff treated them with respect**.

BETTER OFF

- **89%** of clients reported that Howard Center **services made a difference**.
- **82%** of clients reported that their **quality of life improved** because of the services they received.
- **95%** of clients are **currently housed**.

PARTNERS: Community service providers, first responders, colleges and universities, law enforcement agencies, private and publicly-funded agencies, United Way of Northwest Vermont, University of Vermont Medical Center, Vermont community-based non-profits, Vermont schools, Vermont State Agency of Human Services, and municipalities

SERVICES PROVIDED

- 24 hour crisis response for mental health and substance use emergencies
- Child and adult outpatient services
- Substance use treatment
- Services for individuals with severe mental illness
- Services for individuals with developmental disabilities
- Residential homes for adults and children
- Therapeutic school services
- Employment services
- Care management services
- Medical care and consultation
- Consultation for community partners
- Community education

Access and Intake

SERVICE DESCRIPTION

Access and Intake is Howard Center’s front door. It is designed to enhance and streamline care with one central phone number to access all Howard Center services. Access and Intake also provides same- or next-day assessments and interim or short-term supports.

PERFORMANCE MEASURES

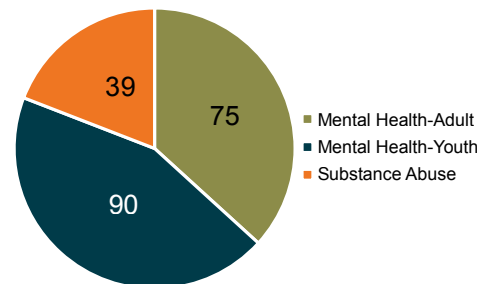
HOW MUCH

- **9,155 calls** made to the call center.
- **229 new clients** received services.
- **372 adults, 210 youth, and 87 clients with substance use issues** were served.
- **431 referrals** to other Howard Center programs; **186 referrals** from Howard Center programs.

HOW WELL

- Clients receive support from an **intake navigator** while waiting to be referred to appropriate services, including Medicaid, benefits, or housing applications.
- **7,457 services were provided** to clients, **695 more** than in FY22.

204 Assessments for FY23



BETTER OFF

Of the 33 clients responding to a satisfaction survey,

- **90%** claimed they received the help they needed.
- **100%** reported that the staff treated them with respect.
- **85%** claimed the services they received were right for them.
- **82%** claimed their quality of life improved because of the services they received.

PARTNERS: Age Well Vermont; ANEW Place; Association of Africans Living in Vermont (AALV); Brattleboro Retreat; Burlington Police Community Liaisons; Burlington School District; Champlain Valley Office of Economic Opportunity (CVOEO); Committee on Temporary Shelter (COTS); Community Health Centers of Burlington (CHCB); Pathways Vermont; Refugee and Immigrant Service Provider Network; Safe Harbor; Spectrum Youth & Family Services; The Family Room; Turning Point Center; University of Vermont Medical Center; U.S. Committee for Refugees and Immigrants Vermont; and Vermont Government Agencies: Adult Protective Services; Department for Children and Families; Department of Disabilities, Aging and Independent Living; Department of Health/Children with Special Health Needs; Department of Mental Health; Economic Services Division

This is the second year that Access and Intake has embedded multicultural liaison staff and an urgent care case manager into the program. In 2023, three multicultural liaison staff provided 745 services to 36 clients/families.

The urgent care case manager served 71 clients. Nearly 50% were transition-age youth, and 40% were experiencing a first or early episode psychosis.

Although the program sees more adults than youth, more youth complete assessments. Other programs and hospitals complete assessments for adults, but only assessments conducted by Access and Intake are included in this report and the accompanying graph.

“Everyone has been so kind and empathetic, thank you. I just wish there were more counselors (therapy) on staff so that one doesn’t have to wait months after a crisis to begin working through it.”
—A client



Community Support/Employment Services



Our community support and employment programs offer a variety of services that help children, youth, adults, and families participate more fully in their community. Through these programs, clients develop skills and confidence which allow them to pursue their interests.

Zoe's Race raises funds for local families who are in need of support to make their homes accessible.

ARCh (Accessing Resources for Children)



PROGRAM DESCRIPTION

ARCh is a collaboration between Developmental Services and Mental Health Services to provide integrated support services to children and youth 0-22 years of age. Clients have a developmental disability, mental health diagnosis, or a combination of both. Every child/family works with a care coordinator who helps to connect them to resources, routines, support, school meetings and transitions to adult services.

PERFORMANCE MEASURES

HOW MUCH

- ARCh served **260 children** and their families.
- Care coordinators carry caseloads of **25-30 clients**.
- In addition to care coordination, ARCh provides family work, living skills, Applied Behavior Analysis (ABA) consultation, and family managed respite.

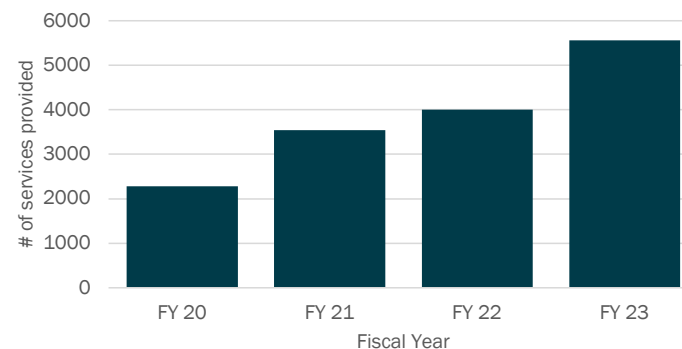
HOW WELL

- Of the 70 families who completed satisfaction surveys,
- Nearly **91%** felt as if the services were right for them.
 - **98%** of consumers felt that staff treated them with respect.

BETTER OFF

- **87%** of clients felt that the services they received made a difference in their lives.
- Nearly **94%** of clients would recommend ARCh to family and friends.

Number of services provided



PARTNERS: CHILL Foundation; Chittenden County Schools and some alternative schools out of county; Lake Champlain Community Sailing Center; Medical Homes; statewide autism workgroup; University of Vermont Medical Center; and Vermont Government Agencies: Department of Disabilities, Aging and Independent Living; Department of Health/Children with Special Health Needs; Department of Mental Health

ARCh continues to serve a high number of clients, and there is a two-year waitlist. The waitlist has never been less than one-year. The Living Skills Program can serve, at most, 42 clients at a time, leading to a long wait for clients to receive this service. This year, the living skills component ran groups three times a week to give clients more opportunities to help build social skills.

There has been an increase in young children—sometimes as young as two months old—being referred to ARCh due to the long wait. Although the number of clients has increased, families remain satisfied with services. Families who need only monthly contact choose to remain in ARCh, due to the flexibility that the program offers and to maintain a connection with the program.

There has been a significant increase in the level of need children and families are experiencing, including an increase in crisis support. Often, these families stay with ARCh, as other programs are not able to serve children with developmental disabilities. Families express a strong need for living skills, and they often express frustration about the long wait for services.

Career Connections



PROGRAM DESCRIPTION

Career Connections offers adults in the Community Support Program career counseling, job development, post-employment support, benefits counseling, self-employment opportunities, and supported education for individuals returning to or beginning college or a job training program.

PERFORMANCE MEASURES

HOW MUCH

- In FY23 Career Connections served **110 individuals**; 55 were employed.
- **23 clients** received technology support.
- The program received **33 new referrals**.

HOW WELL

- Career Connections provides **evidence-based supported employment** and individual placement and support, in accordance with recognized professional standards.
- **90%** of clients reported that the services were right for them.
- **86%** of clients reported that the the services they received made a difference for them.

BETTER OFF

- **76%** reported that their quality of life improved because of the services they received.
- **69%** reported that they felt more valued by society because of the services they received.
- **64%** reported that their life had more meaning and purpose.



“I would highly recommend Career Connections. I can honestly say that working with my employment counselor has changed my life. I went from being in and out of the hospital to having the security of a job that I love. I feel like I have a reason to leave the house, and the work that I’m doing has a positive impression on my community.”

—A client

OVERVIEW HIGHLIGHTS AND NOTABLES:

Career Connections is a small, supported employment program, with a coordinator, two part-time and two full-time employment counselors, a part-time benefits counselor, and a part-time employment assistant. It is critical to have individuals with lived experience on our team.

Our evidence-based approach adheres to 20 clients for each full-time caseload. Once a client is working successfully, they are supported by their care manager, which frees up staff to work with new referrals.

PARTNERS: Community College of Vermont, HireAbility, local businesses, Mercy Connections, Vermont Adult Learning Center, Vermont Department of Health

Community Outreach Program



PROGRAM DESCRIPTION

The Community Outreach Program was created as a collaborative effort between Howard Center and local town and law enforcement stakeholders to assist individuals in the community with unmet social service needs, often as a result of mental illness or substance use. The team assists all ages, allowing first responders to respond to emergent needs and criminal behavior. Participating towns include Colchester, Essex, Hinesburg, Milton, Richmond, Shelburne, South Burlington, Williston, and Winooski.

PERFORMANCE MEASURES

HOW MUCH

- Community Outreach staff made **4,261 total contacts**, representing **798 unique individuals**.
- The team made **142 youth contacts**, **544 contacts with individuals age 61+**, and contacts with **17 veterans**.
- 4,753 calls** were placed or received by Community Outreach staff.

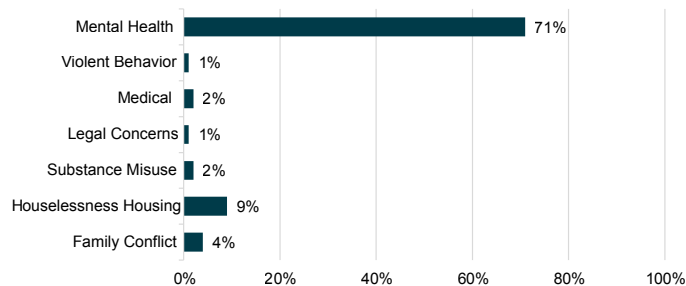
HOW WELL

- Of clients who completed the satisfaction survey, **100%** claimed staff treated them with respect and that they received the help they needed.
- 100%** of community partners claimed staff provide high quality collaborative care.
- 3%** of client contacts resulted in a client requiring a trip to the Emergency Department.

BETTER OFF

- The Community Outreach Team provided **1,219 referrals** to community-based services for mental health, housing, substance use, medical, and other social services.
- 100%** of stakeholders claimed the community is better off because of the Community Outreach team.
- 47%** of police-involved contacts diverted first responder/police involvement, saving municipal time and resources.

FY23 Community Outreach Primary Presenting Concerns



“Community Outreach lightens the load on police services, allowing us more time for other pressing needs.”
—A law enforcement partner

PARTNERS: Champlain Valley Office of Economic Opportunity; Committee on Temporary Shelter; First Call for Chittenden County; local housing organizations; local police departments; University of Vermont Medical Center; Vermont Government Agencies; Vermont Department for Adult Protective Services, Vermont Department for Children and Families Economic Services Division

OVERVIEW HIGHLIGHTS AND NOTABLES:

The team continues to proactively engage individuals in the community while diverting unnecessary use of first responder resources.

The team has been working to connect to all towns across the county and build supportive relationships with municipalities.

In FY23, two Community Outreach positions remained vacant for a prolonged period, which contributed to a decrease in overall service volume.

Community Support Program (CSP)



PROGRAM DESCRIPTION

The Community Support Program (CSP) serves adults with significant mental health issues, many with co-occurring substance use challenges. CSP provides care management, psychiatry, employment, residential, and recovery supports. Criteria for the program are set by the Department of Mental Health, and CSP also serves a court-mandated population.

PERFORMANCE MEASURES

HOW MUCH

- **552 clients** received services.
- The CSP program had **112 residential placements** at **12 different sites**.
- **16 clients** were hired as Westview House peer leaders and Odd Jobs staff.
- CSP's Career Connections employment program served **110 clients** (ages 18-64).

HOW WELL

- **90%** of CSP clients reported that they received the help they needed.
- **100%** of CSP clients reported that staff treated them with respect.
- **100%** of new CSP clients were screened for substance use and trauma history, using standardized tools.
- **All CSP care managers** were trained in the use of the Adult Needs and Strengths Assessment (ANSA).

BETTER OFF

- **84%** of clients who responded to this year's survey said that CSP services made a difference.
- **90%** of Career Connections clients who were surveyed claimed that services were right for them.
- **84%** of clients who were surveyed reported that their quality of life had improved.
- **64%** of Career Connections clients claimed that their life has more meaning and purpose now.



"I worked many years, including a little over 10 for Howard as a peer community support worker. I was always totally and enthusiastically supported by all my treatment staff."

—A client

OVERVIEW HIGHLIGHTS AND NOTABLES:

Howard Center's Community Support Programs frequently collaborate with numerous partners to create and deliver initiatives that help all members of our community. Services are provided at Howard Center sites, community locations, and in client homes. Clients participate in establishing their own individualized treatment plans and goals.

"My team is extremely supportive of my future-oriented goals."

—A client

"I have found and kept a job quite well and am working to my abilities and personal goals."

—A client

PARTNERS: Burlington Housing Authority, Cathedral Square, Champlain Housing Trust, Committee on Temporary Shelter, Community Health Centers of Burlington, University of Vermont Medical Center

Dialectical Behavior Therapy (DBT)



SERVICE DESCRIPTION

Dialectical Behavior Therapy is a skills training program designed to help clients learn skills to regulate emotions, build personal awareness, resolve interpersonal conflicts, and tolerate distressing situations.

PERFORMANCE MEASURES

HOW MUCH

- DBT offers **five groups** with **32 participants** (27 clients, five support staff).
- The DBT program runs from September to May, providing **31 two-hour group sessions**.
- The DBT team offers a four-part, **12-hour training** on using DBT skills within client services.
- In collaboration with the Howard Center School Services, the DBT team provided DBT in **four local schools**.

HOW WELL

- The DBT program is supported by **12 skills leaders**: three licensed clinicians, two master-level clinicians, and seven supervisory-level staff.
- DBT offers support to clients within Developmental Services and Community Support Programs to enhance collaboration between long-term services and support teams.
- **100%** of survey respondents agreed/strongly agreed that their skills leader treated them with respect.
- **86%** of survey respondents agreed/strongly agreed that the program was right for them.

BETTER OFF

- **95%** of survey respondents agreed/strongly agreed that they received the help they needed.
- **90%** of survey respondents agreed/strongly agreed that their quality of life improved because of the services they received.
- **95%** of survey respondents agreed/strongly agreed that the DBT program made a difference for them.

OVERVIEW HIGHLIGHTS AND NOTABLES:

Data results are from a survey of 21 clients. This is an increase from only eight responses in 2022. This year, clients responded to the survey in-person during group sessions with the support of coaches and leaders.

Groups were offered only in-person this year. Clients and leaders felt that the hybrid group model was distracting and that the dialogue and conversation was more rich when it occurred in-person. The program received much positive feedback about feeling connected to leaders and group members.

When asked what was most helpful about the group, clients responded:

- “DBT was most helpful, because they were there when I needed help.”
- “It helped me to use some skills at work and with my friends.”
- “It helped me talk about my feelings more.”
- “It helped me apply skills to my daily life.”

PARTNERS: Dialectical Behavior Therapy learning community, supported by Vermont Cooperative for Practice Improvement and Innovation

Early Childhood and Family Mental Health Program



PROGRAM DESCRIPTION

The Early Childhood and Family Mental Health Program, formerly known as The Early Childhood Program, supports the social and emotional growth of children, from birth to age six, in partnership with their caregivers and providers, through supportive counseling, psycho-educational support around child development, care management, consultation, and training. Early intervention has a significant lifelong positive impact on children, families, and our community.

PERFORMANCE MEASURES

HOW MUCH

- **112** children received services, including **75 new referrals**.
- Clinicians provided **therapy** to families impacted by perinatal mood and anxiety disorders.
- **Two full-time staff** served **38 clients**, a 60% increase from last year.
- **25 consultations** for children were provided in homes and childcare centers.
- Through a partnership with Champlain Valley Head Start, the program provided **58 hours of training and consultation** for childcare staff, children, and families.

HOW WELL

- **85%** of new client inquiries were contacted by telephone within five days and offered an intake and assessment appointment.
- **Perinatal support program** serves clients with various types of insurances, when as many as one in five pregnant or postpartum Vermonters have symptoms of depression and/or anxiety during their perinatal period.
- The program uses a variety of **successful trauma-informed, evidence-based practices**.

BETTER OFF

- **90%** of clients reported they obtained the help they needed; 93% believed their quality of life improved because of these services.
- **100%** of clients receiving perinatal support services reported that they received the help they needed and their quality of life improved.

“The clinician was a great advocate for our family. She listened well and heard our concerns and was right there at the table with us advocating for those resources.”

—A parent

PARTNERS: Building Bright Futures; Children’s Integrated Services; Chittenden County school districts; early education programs/providers; Head Start; University of Vermont Medical Center Pediatric and Family Practices; Vermont Government Agencies: Department for Children and Families and Department of Mental Health

OVERVIEW HIGHLIGHTS AND NOTABLES:

The program recognizes that early intervention has a lifelong, positive impact on children, families, and the community.

Program clinicians are committed to providing high quality services and participate in numerous trainings to enhance their skills and techniques, including trainings and certifications to support clients with perinatal mood and anxiety disorders.

Clinicians attended the Legal and Ethical Dilemmas session at the Perinatal Mental Health Conference and a training designed to provide short-term intervention for families experiencing domestic violence. Three clinicians began participation in an 18-month child-parent psychotherapy learning collaborative.

Clinicians shared their expertise in trainings with Howard Center staff and with the larger community.

Enhanced Family Treatment & Family and Community Based Services Living Skills Program



PROGRAM DESCRIPTION

Living Skills Interventionists in the Enhanced Family Treatment (EFT) and Family and Community Based Services (FCBS) programs provide individualized community support to clients experiencing social, emotional, and behavioral difficulties in community and home settings. Interventionists work closely with clinicians and families to determine goals and objectives and to monitor progress. Interventionists plan and engage clients in age-appropriate activities that target identified treatment goals with the intent of improving functioning across settings.

PERFORMANCE MEASURES

HOW MUCH

- FCBS/EFT interventionists provided services to **32 clients**.
- FCBS/EFT interventionists provided **2,872 hours** of individual community supports.
- Interventionists offered **14 weeks** of group, vacation, and summer programming. The skills program also increased participation in Burton's CHILL program to include the snow program and fall and spring skateboarding programs.

HOW WELL

- **Nearly all clients** were able to access and successfully participate in activities within their communities with the support of their interventionist.
- **27 out of 32 clients** maintained community-level care at the time of discharge.
- **100%** of caregivers agreed that interventionists treated their child with respect.

BETTER OFF

- **100%** of caregivers claimed the services provided were right for their child.
- **80%** of caregivers who completed a satisfaction survey felt that their child received the help they needed and that the program made a difference in their child's life.

OVERVIEW HIGHLIGHTS AND NOTABLES:

The FY23 Living Skills programming resembled pre-pandemic programming. Due to COVID and other illnesses, scheduled services were often missed, although to a lesser degree than in previous years. However, interventionists and clients had more consistent and greater access to community and recreational activities.

Staff recruitment remained an ongoing challenge for this program and the agency. Within the Living Skills program, there were consistently two to three open positions at any given time. These vacancies impacted the number of clients served, the number of structured skills groups offered, and overall services provided.

"Having fun with friends" is one client's favorite thing about the program.



"Staff are absolutely amazing. This program was exactly what we needed, and I do not know what we would be doing if we didn't have it."

—A family member

PARTNERS: BlueCross and BlueShield of Vermont, CHILL Foundation, local after-school programs, Sara Holbrook Community Center, and other Howard Center programs

Family and Community Based Services



PROGRAM DESCRIPTION

The Family and Community Based Services (FCBS) program provides in-home family support to children and their families who may be experiencing significant mental health challenges. Families are matched with a clinician and together they develop and work on treatment goals. The primary goal of the program is to provide family-focused, child-centered treatment and support. Clinicians work closely with families to determine goals and objectives and monitor progress.

PERFORMANCE MEASURES

HOW MUCH

- **3,872 hours of service** were provided to children and their families through Family and Community Based Services.
- **126 clients and their families** were supported by six Family and Community Based Services clinicians.
- **55 families** were discharged from the program, representing a 26% increase from the previous year.

HOW WELL

- **95% of families** who completed the satisfaction survey said this was the right program for them.
- **94% of families** would recommend this program to a friend or relative.
- **100%** of the families who completed the satisfaction survey agreed that the services provided were helpful to the family and/or the client.

BETTER OFF

- **96% of families** reported that they did not have DCF involvement at the time of discharge.
- **99% of families** felt that their quality of life had improved as a result of their participation.
- **99%** of families discharged from the program stepped down to less intensive services, including outpatient counseling and school services, or they were no longer in need of additional services.
- **100%** of caregivers of children/youth who received services exhibited an increase and/or stabilization of their level of parenting knowledge, as reflected on their CANS “Caregiver Knowledge” rating.



“I was paired with an amazing clinician who understood my needs and was patient with me.”
—A client

PARTNERS: Child Care Resource and Referral; Howard Center programs, including Access and Intake, Early Childhood Program, First Call for Chittenden County, Howard Center outpatient therapists, Howard Center schools and school-based clinicians, and Jarrett House Crisis Stabilization Program; King Street Center childcare program; primary care physicians; private outpatient therapists; Vermont Department for Children and Families; Vermont Family Network

OVERVIEW HIGHLIGHTS AND NOTABLES:

During FY23, there were two staff vacancies. One vacancy was filled within eight months. The second vacancy remained open for the full twelve months.

This year saw a decrease in the number of families being referred for in-home services. In the past, there was a lengthy waitlist for the program. Because of the shorter waitlist, families were assigned a clinician shortly after being referred to the program.

WHAT OUR CLIENTS ARE SAYING:

“My clinician was amazing. He exceeded expectations. We enjoyed working with him.”
—A client

“Our clinician was amazing. She called us all the time to check in. She met with our family and our youngster and was so helpful.”
—A client

Film Group



PROGRAM DESCRIPTION

The Film Group is a new innovative program. Clients have the opportunity to learn about and experience some of the many aspects of filmmaking, while working with others in a creative group setting.

PERFORMANCE MEASURES

HOW MUCH

- Between May 2022 and September 2023, the program served **seven clients**.
- A completed film will premiere at an opening night event.
- Clients with multiple communication styles and perspectives worked cohesively and kindly together.

HOW WELL

- **All the clients became friends** within and outside of the group, which is one of the program's goals.
- **All clients gained valuable communication skills** and expressed appreciation of the group.
- **The group will be offered again** in FY24 and will serve seven clients, the maximum number for the program.

BETTER OFF

- There was **100% attendance** and completion throughout the project.
- Participants **improved their communication skills**.
- **100%** of the clients approve of the movie they made and claim it was what they wanted to make and deliver to the world.



The image included in this report is the logo for the Film Group. It was designed by clients, and it is meant to convey the themes of connection and community-building that are basic to the group and to the creative process.

PARTNERS: City Market, City of Burlington Parks and Recreation Department, Humane Society of Chittenden County, Media Factory, Nomad Coffee

OVERVIEW HIGHLIGHTS AND NOTABLES:

This program is designed for clients who enjoy film, video, music, photography, acting, drama, theater, gadgets, drawing, painting, imagery, and being creative.

Through group participation, clients learn and apply interpersonal skills that are needed to be part of a group, such as patience and focus, while developing a sense of community. Participants learn how to hear and share feedback and gain the ability to voice their ideas.

Participants showcase their work in a completed project.

WHAT CLIENTS ARE SAYING:

"I love Film Group!" —A client

"Film Group is the highlight of my week." —A client

"It is so much fun coming to Film Group!" —A client

"I made friends in Film Group!" —A client

Impaired Driver Rehabilitation Program



PROGRAM DESCRIPTION

In Vermont, anyone convicted of an impaired driving offense must successfully complete the state's Impaired Driver Rehabilitation Program (IDRP) before driving privileges can be reinstated. The IDRP uses an evidence-based educational curriculum to provide individuals the opportunity to openly examine facts about alcohol and/or other drug use and discuss the role these substances play in their life. In addition to the education component, additional treatment may be required for program completion.

PERFORMANCE MEASURES

HOW MUCH

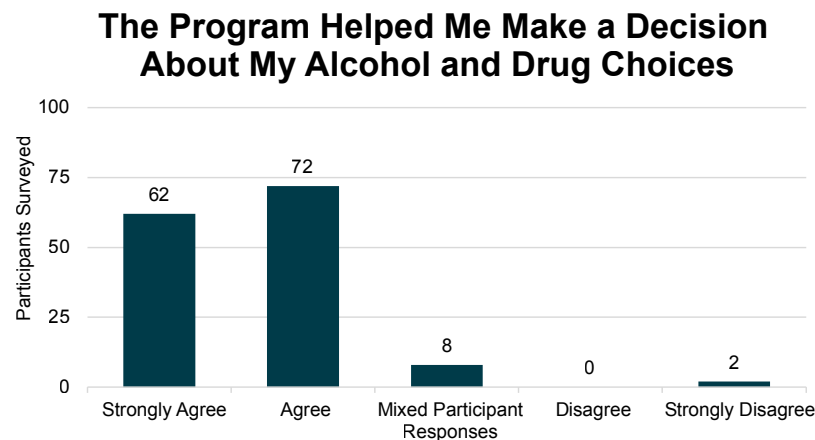
- **209** individuals completed the program's education component.
- **232** new individuals were enrolled.
- **Nine** Impaired Driver Rehabilitation Program participants required interpretive services.
- **88%** of participants surveyed agreed that the services were right for them.

HOW WELL

- **94%** of participants surveyed agreed that they received the help they needed.
- IDRP provides additional support, interpretive services, and customized curriculum to individuals with reading disabilities or for whom English is a second language.

BETTER OFF

- Clients reported **increased independence and engagement** in work, school, parenting, and other positive social activities by increasing access to transportation.
- The program provides participants with **tools, knowledge, and skills** to make low-risk choices around alcohol and substance use.
- **80% of participants** surveyed agreed or strongly agreed that their quality of life improved because of the services they received.



PARTNERS: Association of Africans Living in Vermont, LanguageLine, U.S. Committee for Refugees and Immigrants, Vermont Department of Health Division of Substance Use Programs

OVERVIEW HIGHLIGHTS AND NOTABLES:

The IDRP program did not offer classes or evaluations for a three-month period between July 2022 and October 2022.

Here's what our clients are saying:

"The program was insightful and knowledgeable, and the stories about people's high-risk choices really helped me understand how my own high-risk choices can have a major negative impact on peoples' lives around me."

— A participant

"I cannot express enough how convenient the timing of the program and the format made this experience. It is much appreciated."

— A participant

"Relevant content, delivered with empathy and class."

— A participant

Jump On Board for Success (JOBS)/ Youth in Transition (YIT)



PROGRAM DESCRIPTION

The Chittenden County Jump on Board for Success (JOBS) and Youth in Transition (YIT) programs serve youth, ages 16-22, who have been identified as having an emotional/behavioral disability and are in need of intensive care management services and support to attain and maintain a job.

PERFORMANCE MEASURES

HOW MUCH

- JOBS and YIT served 102 clients, including 49 new clients. 40% were under 18; 10% identified as gender non-conforming, non-binary, or transgender; and 29% identified as BIPOC.
- **All youth** developed personal treatment goals and received mental health assessments.
- **Care managers** had contact with each client three times per month, on average, and ranging from once every other week to four or five times a week.
- Youth worked on a variety of **skills**, including employment, education, life skills, and time management.

“Thank you. I appreciate you. You’re such a big help. I mean that.”

—A client

HOW WELL

- **82%** of youth who entered the program were engaged in services within 30 days of referral to JOBS.
- The JOBS program effectively engaged BIPOC youth; 29% of youth identified as BIPOC, which exceeds the Chittenden County community percentage of 12% and the Chittenden County percentage of middle school and high school students of 23%.
- **JOBS Program clinicians** are licensed, master’s level, or working towards their master’s degree and have been trained in trauma-informed care, as well as the Transition to Independence Model (TIP) which helps young adults with mental health challenges gain independence.

BETTER OFF

- **35 youth** exited the program this year after an average of two years.
- Of youth exiting the program, **77%** were employed or enrolled in education; **88%** were better able to attend to their mental health, develop healthy relationships, and/or use substances appropriately; and **85%** were better able to gain and/or retain employment.

“So few people really understand the big picture with [client]. You’re one of the few that do.”

—A parent

“You are so good at your job! Thank you for seeing my work and joining me in it with all of your passion and commitment.”

—A provider

PARTNERS: Creative Workforce Partners, Community College of Vermont, HireAbility VT, Northeastern Family Institute, Spectrum Youth and Family Services, Vermont Adult Learning, Vermont Department for Children and Families, Vermont Family Network, ReSource

OVERVIEW HIGHLIGHTS AND NOTABLES:

The JOBS program is a collaboration with Spectrum Youth and Family Services and HireAbility VT. Clinicians in the program build trusting relationships with youth and support them to gain stable, competitive employment. The program uses a holistic, positive, youth development approach.

Clinicians work with clients to establish treatment goals and find ways to overcome barriers that prevent youth from living successfully in the community. Clinicians meet with clients on-site and in the community.

This past year, JOBS continued to see an increase in the acuity of mental health challenges experienced by clients. This is likely due, in part, to an overall increase in anxiety following the pandemic and the sense of isolation many folks have experienced in recent years. The JOBS program works with clients to decrease anxiety so clients can be out in the world again. The loss of social opportunities since COVID appears to have taken a toll on mental health in ways we still don’t fully understand and continue to experience.

Parent-Child Interaction Therapy



PROGRAM DESCRIPTION

Parent-Child Interaction Therapy (PCIT) is an evidenced-based therapy for children ages 2½ through 6, and their caregivers. The certified therapist provides in-the-moment coaching, through a one-way mirror, to support the family's use of effective skills to manage the child's challenging behavior and to enhance positive parent-child interactions.

PERFORMANCE MEASURES

HOW MUCH

- **28 families** began PCIT services; **14 families** successfully completed all PCIT interventions and graduated from the program.
- Families took an average of **23 weeks to graduate** from the PCIT program.
- **Two clinicians** received training in CALM, an anxiety-focused adaptation of PCIT, to support children with anxiety-related symptoms.
- **One clinician** was trained in the CARE model, an approach that teaches skills and philosophies in an accessible format for families.

HOW WELL

- **100%** of families, at completion of their treatment, indicated that they received the help they needed and that the services were right for them.
- Based on the Eyberg Child Behavior Inventory (EBCI) scores at pre- and post-PCIT treatment, the intensity of stress/challenges decreased by an average of 58 points, a **40% decrease** related to the impact of challenging behaviors within the family.
- **25%** of new PCIT referrals were from former PCIT client recommendations, an **increase of 5%** from the previous year.

BETTER OFF

- **100%** of families who responded to our consumer satisfaction survey indicated that as a result of their involvement in PCIT, their **quality of life improved**, the services they received **made a positive difference** in their family, and they would **highly recommend** PCIT to a friend.

OVERVIEW HIGHLIGHTS AND NOTABLES:

PCIT has continued to be a sought-after therapy program, with increasing annual referrals.

The process to become a certified PCIT therapist is demanding and requires six to nine months of training with a certified PCIT trainer, successful completion of three PCIT cases, and a written exam.

This process requires a significant commitment of time and financial resources. Unfortunately, when a trained clinician leaves their position, it can impact service capacity for an extended period.

The success of this treatment is evident in the statistics and the numerous written responses from families who claim the program has had a positive impact on their parent-child relationships.

“The tools provided by our clinician, specifically communication, have been transformative for our family. “Special Time” is something we will continue in perpetuity; it is a great way for us to connect with our children. It has brought our family closer together. Just five minutes a day has a huge impact! It has allowed our parenting to be more accountable and consistent.”

—A client

PARTNERS: Area pediatric and family medical providers, Chittenden County School Districts, Head Start, Lund Family Center, University of Vermont Medical Center, Vermont Department of Mental Health

Peer Support Services



PROGRAM DESCRIPTION

Peer Support Services (formerly known as START) provides community-based peer support. Through outreach, engagement, and connection, peer-community recovery specialists provide mental health recovery support that is strengths-based and hope-driven. Peer support reduces social isolation and increases a sense of community and belonging.

PERFORMANCE MEASURES

HOW MUCH

- Peer Support Services provided **3,171 individual services** to **229 clients**.
- Peer Support Services engaged **29 new clients**.
- Out of **122 referrals**, three clients declined services.

“Thank you for providing this option while I was on the waitlist for individual therapy. It was a great bridge.”

—A client

HOW WELL

- Part-time staff roles were combined into one full-time position to **increase continuity of care** for clients and enhance team coordination and collaboration.
- The **team lead role evolved** to better focus on program development and enhance service delivery.
- A Peer Support Services staff team member completed a **Collaborative Network Approach (CNA) training** and co-facilitated Community Advocacy Network meetings.
- A Peer Support Services clinician completed an **international training certification** program and co-chaired two international conferences.

BETTER OFF

- Peer Support Services implemented a pilot project to **strengthen access and collaboration** and expand point-of-care access for clients in need of hospital diversion.
- **91%** of individuals who received support reported that the services made a difference for them.
- Through reorganization, Peer Support Services was able to offer **1:1 peer support** to increase service choices and availability, while reducing cost.

OVERVIEW HIGHLIGHTS AND NOTABLES:

To support a statewide goal of integrating peer specialist support into every level of service, Peer Support Services created the Peer Support Integration Workgroup.

The goal of the newly created initiative is to provide support services throughout Howard Center and establish best practice guidelines for peer support throughout the agency.

In addition, staff will pursue peer specialist certification and complete the required peer specialist training certification.

PARTNERS: Doors to Wellbeing, Intentional Peer Support, Mad Freedom, National Association of Peer Supporters, Pathways Vermont, Vermont Department of Mental Health: Peer Workforce Development Initiative, Vermont Psychiatric Survivors, Westview House

Project Hire



PROGRAM DESCRIPTION

Project Hire assists individuals with an intellectual disability or autism find and keep meaningful and competitively paid work. Individuals with this diagnosis have been historically underemployed and reliant on public benefits. Securing employment is key to overall satisfaction, emotional well-being, social connection, and increased financial stability.

PERFORMANCE MEASURES

HOW MUCH

- Project Hire **served 239 people**.
- The **employment rate** for people in the program was **80%**.
- **70 individuals** received assistance to secure new employment.

HOW WELL

- **Job seekers** were at the forefront of decision-making regarding career exploration.
- Individuals' **incomes increased**, decreasing reliance on public benefits.
- **18 students** who graduated from high school were supported in their transition into adult services, while maintaining employment.

BETTER OFF

- The average rate of **pay increased by 5.5%** to \$15.29 per hour.
- The average number of **hours worked per week increased by 40%**, to an average of 13.8.
- Several individuals who previously needed 1:1 support at work began to **work independently**.



“I like the atmosphere, co-workers, and supervisor. The job gives me a sense of independence, as well as spending money to do the things I want.”

—A client

OVERVIEW HIGHLIGHTS AND NOTABLES:

- Program began at Howard Center in 1982.
- Provides services that have a positive impact in the community.
- Supports ongoing skill development.
- Supports clients to find competitively-paid employment.

PARTNERS: Chittenden County businesses; family members; guardians; HireAbility; Vermont Government Agencies: Department of Aging, Department of Education

Project SEARCH



PROGRAM DESCRIPTION

Project SEARCH is a business-led collaboration that enables young adults with disabilities to gain and maintain employment through training and career exploration. Interns gain employability skills through a combination of classroom instruction and participation in three internships within a business for a full academic year.

PERFORMANCE MEASURES

HOW MUCH

- Project SEARCH served **four new interns**, one less than last year.
- Each participant completed **three different internships**, lasting 10-12 weeks each.
- **50%** of interns were enrolled in their final year of high school.

HOW WELL

- The program maintained successful community partnerships.
- Interns received regular feedback from department managers and peers about areas where they did well, in addition to areas for improvement.
- Interns transitioned into the adult employment program for ongoing support to maintain employment.

BETTER OFF

- Following completion of the program, **100%** of interns were employed within five months.
- **55 individuals** have completed the program since the program's inception eight years ago.
- **84%** of individuals receiving services continue to be employed.



“Project SEARCH is good for getting experience. I get real-time feedback without being thrown into navigating a job, especially when I’m not confident in my ability to be 100% professional in a new job.”

—An intern

OVERVIEW HIGHLIGHTS AND NOTABLES:

Project SEARCH is an international initiative.

Howard Center’s program is a collaboration with the University of Vermont Medical Center, and provides internships for young adults transitioning from high school to employment.

The program provides specific supports and services that are individualized for each person, based on their interests and employment goals.

PARTNERS: HireAbility VT, Howard Center, South Burlington High School, University of Vermont Medical Center (host business), Vermont Department of Aging and Independent Living

Safety Connection



PROGRAM DESCRIPTION

Safety Connection is an overnight independent living support service for individuals with disabilities and mental health challenges. The program operates year-round from 8:00 p.m. to 7:00 a.m. and provides an individualized, check-in service for participants, in addition to short-term, remote, and in-person outreach/interventions.

PERFORMANCE MEASURES

HOW MUCH

- Safety Connection supported **111 participants** in 12 Vermont cities and towns.
- The program conducted **19,236 nightly check-ins** with participants.
- **3 participants** were granted a Section 8 housing voucher.
- **95%** of clients benefited from local or state rental assistance.

HOW WELL

- **88%** reported that “Safety Connection met their changing needs; **94%** claimed they can always get help at night when needed; **87%** claimed they felt safe at home during the night; and **89%** have people they feel comfortable asking for help at any time.

BETTER OFF

- Program participants benefited from a total of **716 short-term interventions**, in addition to regular participant check-ins.
- **47%** of participants are ages 18-30.
- **99%** of Safety Connection clients retained or improved housing.

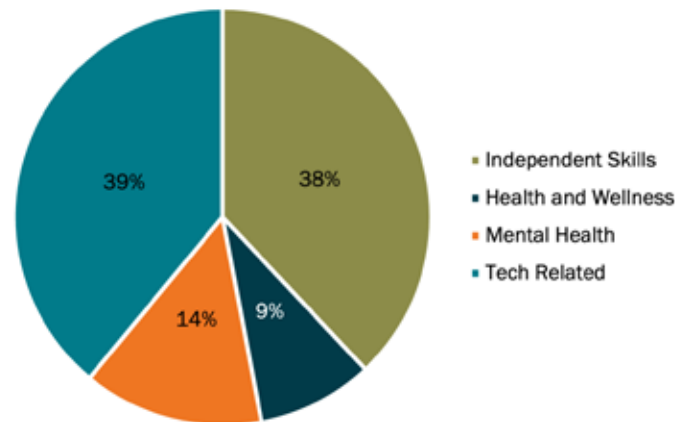
OVERVIEW HIGHLIGHTS AND NOTABLES:

FY23 saw the decline of the global pandemic. During FY23, several participants returned to their apartments, while many others sought out Safety Connection services for the first time.

The total percentage of participants over 60 grew to 12%, up from 9% during FY22. There were also warning signs of a housing crisis as Safety Connection applicants struggled to find affordable, safe housing.

In FY23, several applicants to the program already had secure housing or had the option of more non-traditional housing opportunities, such as accessory apartments.

FY23 Intervention Activity



“I appreciate how there is always someone to talk to. They never judge me, and I feel like they genuinely care about me as a person.”
—A participant

PARTNERS: Burlington Housing Authority; Vermont Department of Disabilities, Aging, and Independent Living; Choices for Care/Home Health and Hospice; Vermont Designated and Specialized Service Agencies

Street Outreach



PROGRAM DESCRIPTION

Street Outreach works collaboratively with merchants, community members, first responders, and health and behavioral health providers to link individuals to supports and services to reduce the burden on emergency services. Outreach workers offer support and respond to unmet needs related to mental illness and substance use.

PERFORMANCE MEASURES

HOW MUCH

- **4,261** contacts with **785 unique individuals**; 63% of services were provided face-to-face.
- **5,715 calls** were placed or received by Street Outreach staff.
- **129 contacts** were provided to youth under 18 years of age; **547** to adults aged 61 or older; and **22** contacts were provided to military veterans.

HOW WELL

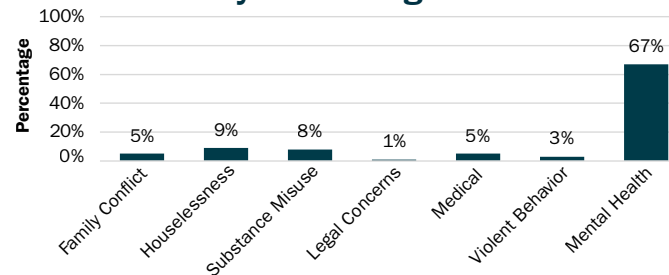
- **1,257 contacts** were initiated by the individual or a community member.
- **178** of Street Outreach contacts resulted in an emergency department visit.
- Street Outreach provided **1,422 consultation support services** to law enforcement, merchants, medical providers, community partners, and landlords.

BETTER OFF

- Street Outreach made **2,408 referrals** to community-based organizations.
- **100%** of law enforcement personnel claim Street Outreach helps to decrease disruptive incidents.
- More than half the time, Church Street **merchants call Street Outreach** instead of law enforcement when they have concerns about an individual(s).

“The Outreach team is responsive and trusted. They tailor their responses based on the individuals in need.”
—A Church Street merchant

**FY23 Street Outreach:
Primary Presenting Concerns**



PARTNERS: Age Well, ANEW Place, Burlington Business Association, Burlington Housing Authority, Burlington Police Department, Champlain Housing Authority, Champlain Valley Office of Economic Opportunity, Chocolate Thunder, Church Street Marketplace, Committee on Temporary Shelter, Community Health Center/Safe Harbor Clinic, Howard Center First Call for Chittenden County, University of Vermont Medical Center Emergency Department, Vermont State Economic Services Division

OVERVIEW HIGHLIGHTS AND NOTABLES:

The Street Outreach team plays a vital role in supporting the community by connecting individuals to necessary services and promoting a safer environment in Burlington.

Clients can self-refer or be engaged by team members on the streets or in neighborhoods. Referrals come from service providers, police, family, friends, merchants, and concerned members of the community. Outreach teams do not provide long-term services. Rather, they are responsive to the immediate needs of community members, providing individuals with support and connecting them with long-term resources.

Public safety continues to be a primary focus for downtown Burlington. Additionally, the city continues to see an increase in individuals facing economic challenges, including houselessness. An increase in client acuity has also coincided with the increased prominence of fentanyl and xylazine.

In FY23, Street Outreach was fully staffed and hired a new director to oversee Howard Center outreach programs.

Suicide Prevention Coordination



PROGRAM DESCRIPTION

The Suicide Prevention Coordinator takes a lead role within Howard Center and Chittenden County and Vermont suicide prevention initiatives to increase infrastructure capability to advance the Zero Suicide framework.

PERFORMANCE MEASURES

HOW MUCH

- The Suicide Prevention Coordinator partnered in the creation and distribution of suicide-prevention guidance documents to **42 Chittenden County public schools**.
- **19 suicide prevention trainings** were provided between March and November 2023.
- **354 participants** were trained in best practices.
- **29 outreach sessions** were provided to groups, including firearm retailers and ranges, medical practices, and multicultural communities.

HOW WELL

- The Suicide Prevention Coordinator and the Leadership Team created **two positions** for trained clinicians to provide services within Howard Center's outpatient therapy program.
- **100%** of training participants reported that they would be able to apply what they learned.
- The Suicide Prevention Coordinator, in collaboration with Howard Center, created **suicide prevention messaging** for community news publications.

BETTER OFF

- **423 firearm cable locks** were distributed.
- **100%** of training participants claimed that they were better able to identify suicide warning signs and were more confident to support someone having suicidal thoughts.
- **Postvention services** were provided in April 2023 and May 2023 to two groups, involving individuals impacted by a suicide death.

OVERVIEW HIGHLIGHTS AND NOTABLES:

The Suicide Prevention Coordinator developed a work plan which focuses on both internal (to Howard Center) and external (Chittenden County and Vermont) suicide prevention initiatives.

The goal of the project is to assist with increased agency infrastructure development to enhance the "lead" element of the Zero Suicide framework.

Number and Type of In-Person Outreach



PARTNERS: Chittenden County public schools, local gun shops, local primary care offices, Northeastern Family Institute, Out of the Darkness Walk



Crisis Services

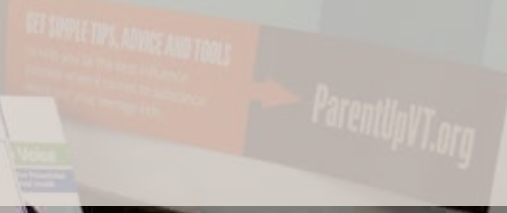


First Call
FOR CHITTENDEN COUNTY

802-488-7777

 **HOWARD CENTER**
Help is here.

Our Crisis Services provide crisis intervention and evaluation services 24/7/365 days a year to children, adolescents, and adults – and their support systems – who are experiencing a mental health or substance use crisis.



Adult Crisis Stabilization Program



PROGRAM DESCRIPTION

The Adult Crisis Stabilization Program (formerly known as ASSIST) is a six-bed crisis stabilization and hospital diversion program for adults who are experiencing a mental health crisis. The program is staffed 24-hours a day, with a combination of rotating direct acute residential staff, a program manager, team lead, and nursing support, as well as part-time psychiatry management and oversight. The program is based on the philosophy of providing services within the least restrictive environment.

PERFORMANCE MEASURES

HOW MUCH

- The program had **225 admissions** and served **164 unique admissions**.
- The program filled **88% of its bed days** for the year (up from 77% last year).
- Of a total of **404 referrals** to the program, 54% came from First Call for Chittenden County (FCCC).

HOW WELL

- The average length of stay at Adult Crisis Stabilization was **5.76 days**.
- **97%** of referrals were accepted; however, many do not translate to an admission. **38%** of referrals were withdrawn while waiting or when an intake was offered to the client.
- **95%** of clients stated that they were treated with respect.

BETTER OFF

- Of the clients surveyed, **90%** stated the program gave them the help they needed during their stay, **93%** claimed they met their goals, and **90%** stated that the services they received made a difference.

OVERVIEW HIGHLIGHTS AND NOTABLES:

The Adult Crisis Stabilization Program, formerly known as ASSIST, recently changed its name to more closely relate to the mission and purpose of the program. The program also underwent physical renovations to provide a more soothing, therapeutic aesthetic to the program.

The program continues to see a high number of clients with insufficient housing resources, which creates challenges related to holistic discharge planning. However, Howard Center's START Team has been very responsive and has been able to offer appointments to clients within a week after they are discharged from the Adult Crisis Stabilization Program to help connect them to other supports.

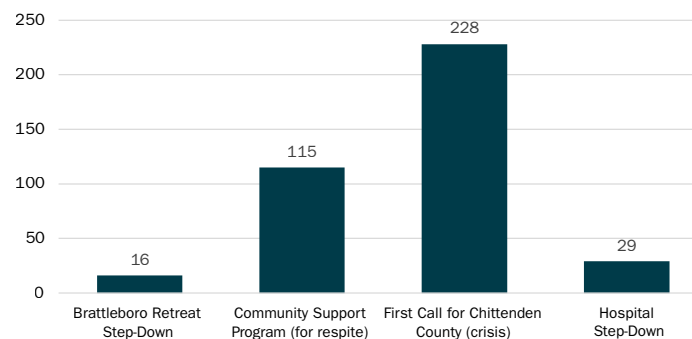
"I appreciate the Adult Crisis Stabilization Program being a bridge from hospital to support treatment, so that I was less vulnerable in between."

—Adult Crisis Stabilization Program Client

"The staff here are always so thoughtful, professional, generous, kind, funny, inclusive, circumspect, and willing to go the extra mile at every turn, whether asked to or not."

—Adult Crisis Stabilization Program client

Program Referral Sources



PARTNERS: ANEW Place; Community Health Centers of Burlington; Crossroads; Seneca Program; Serenity House; Spectrum Youth and Family Services; University of Vermont Medical Center Inpatient Psychiatry and Emergency Department; Valley Vista; Vermont Government Agencies: Department for Children and Families/Economic Services Division and Department of Mental Health

First Call for Chittenden County



PROGRAM DESCRIPTION

First Call for Chittenden County (FCCC) is Howard Center's 24/7/365 crisis hotline and mobile response for people in crisis, regardless of age or diagnosis, with the philosophy that "the caller defines the crisis." Calls may result in phone support, care coordination, referral, face-to-face intervention, and/or assessment. There is no waiting list for services; calls are triaged based on clinical acuity and available resources.

PERFORMANCE MEASURES

HOW MUCH

- First Call for Chittenden County provided **4,283 face-to-face assessments** and served **3,541 unique individuals**.

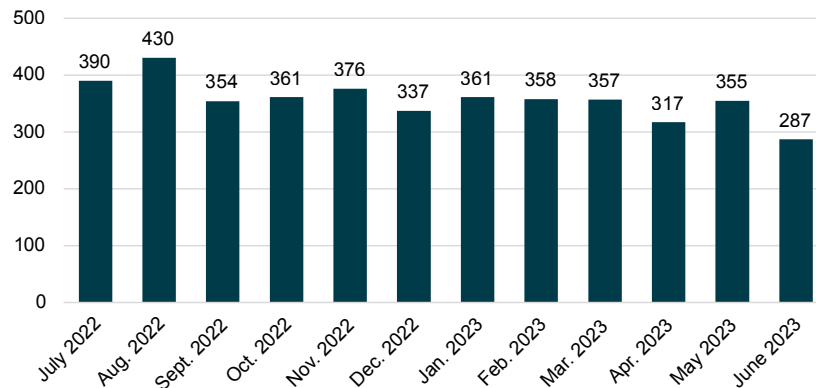
HOW WELL

- 25%** of face-to-face responses were made **within one hour**; **94%** of incoming calls are answered within **0-5 minutes**.
- 1,335 clients** (301 under age 18) made their first contact with First Call, indicating increased awareness of and access to FCCC services to those in need.

BETTER OFF

- 437 clients** referred to ongoing outpatient mental health care and **64** to primary care providers.
- 601 assessments** were for individuals who reported no insurance coverage.
- 92 services** included safety plans to lock up firearms and **271** services included safety plans to lock up medications.
- 464 provider follow-ups** after assessment.

FY23 FCCC Assessment Volume



PARTNERS: Burlington Street Outreach Team; Community Outreach Team; courts; emergency services directors; KidsNet; law enforcement; local colleges; local gun shops; local outpatient clinics; Pathways; primary care provider offices; schools; Second Spring; University of Vermont Medical Center; Vermont Care Partners; Vermont Government Agencies: Department for Children and Families and Adult Protective Services, Department of Mental Health; Vermont Office of Veterans Affairs

OVERVIEW HIGHLIGHTS AND NOTABLES:

Staff vacancies continue to impact program operations and response times, with turnover in clinician, administration, and supervisor roles. In FY23, at least six key leadership positions were unfilled.

The team has continued to use Telehealth when necessary, due to COVID, safety, or client choice. While the majority of assessments take place face-to-face, having Telehealth as an option has also given First Call the ability to serve those who were previously uncomfortable meeting face-to-face.

In FY23, First Call continued work to deepen collaborative relationships with local law enforcement, including paired training on de-escalation best practices and supportive co-responses to clients in crisis.

**"I felt cared for and heard."
—A First Call client**

"Life changing on so many levels. I want to sincerely thank everyone at First Call from my heart!"

—A First Call client

Jarrett House



PROGRAM DESCRIPTION

The Jarrett House is a six-bed crisis residential program for children ages 5-13 experiencing an acute mental health crisis. The program provides short-term, trauma-informed care, while partnering closely with families and treatment teams in discharge planning to support a child's safe return to the community.

PERFORMANCE MEASURES

HOW MUCH

- **113 clients**, from 12 Vermont counties, received services.
- Staff completed **151 separate admissions**.
- The average length of stay for a client was **five days**.
- **13%** of admissions to Jarrett House were in the custody of the Vermont Department for Children and Families.

HOW WELL

- **73%** of caregivers found telehealth options as effective as meeting in person when coordinating the care of their child at Jarrett House.
- **100%** of full-time Jarrett House staff are trained in Therapeutic Crisis Intervention (TCI).
- Caregivers reported that the referrals and collaboration provided by the program made it **easier to find and access services** for their child.

BETTER OFF

- **94%** of overall admissions discharged to a lower level of care.
- In FY23, **81%** of clients served by Jarrett House did not have a readmission.
- **55%** of caregivers reported that the services at Jarrett House made a difference for their families.



“Staff was amazing! I was very impressed with the tools my child came home with, and we are still utilizing everything that was sent home.”

—A caregiver

OVERVIEW HIGHLIGHTS AND NOTABLES:

Due to significant staffing challenges, Jarrett House was closed most weekends during FY23. The length of stay for most children was Monday through Friday or Saturday. The shorter length of admission was appropriate for many children, though some children would have benefited more from the previous 7-10 day average length of stay.

“The five-day stay helped our child implement and practice coping skills and other positive new habits.”

—A caregiver

PARTNERS: Brattleboro Retreat; community mental health providers; schools; University of Vermont Medical Center; Vermont Designated Agencies (especially crisis teams); Vermont Government Agencies: Vermont Department for Children and Families, Vermont Department of Mental Health



Educational Services



The School Services team

Our educational programs are designed to prepare each student, regardless of age, to live independently. A common goal of all our educational programs is to help students develop their unique strengths and learn new skills that will help them achieve independence and lead fulfilling lives.

Autism Spectrum Program



PROGRAM DESCRIPTION

The Autism Spectrum Program (ASP) provides intensive, specialized instructional and behavioral treatment and support to individuals ages 2-22 with an autism spectrum disorder (ASD). Services are provided in school, community, and center-based settings and target the teaching and shaping of essential social communication and adaptive behavior and daily living and functional learning skills, using principles of Applied Behavior Analysis (ABA).

PERFORMANCE MEASURES

HOW MUCH

- ASP provided **intensive Applied Behavior Analysis (ABA)** 1:1 behavioral treatment services to **22 children** and youth, ages 5 to 18 years, and center-based services to six clients, ages 2 to 5 years old.
- ASP provided **consultation services** to **11** additional children and youth in 14 Chittenden County schools.

HOW WELL

- A team of **ten licensed Board Certified Behavior Analysts (BCBA)** lead the program and oversee the individualized treatment interventions of each client.
- Program effectiveness is evaluated using individualized data. Additionally, in FY 23, the ASP offered **20 days of professional development**.

BETTER OFF

- **88%** of ASP children/youth exhibited a decrease in their overall level of clinical need or maintained a stable level of need.
- **95%** of school/related-service survey respondents agreed or strongly agreed that the services provided had a positive influence on the school's relationship with the families.
- **92%** of family survey respondents agreed or strongly agreed that the services helped to improve their quality of life.



“The whole team has been amazing, and my son’s doing great because of their help and continued support.”

—A parent

PARTNERS: Chittenden County School Districts, including Burlington, Champlain Valley Union, Colchester, Essex Westford, Mount Mansfield Union, South Burlington, and Winooski; Howard Center Accessing Resources for Children (ARCh); statewide designated agency leaders of Behavior Intervention; Stern Center for Language and Learning; University of Vermont Medical Center/Developmental Pediatrics Children’s Specialty Center; University of Vermont Interdisciplinary Team; Vermont Department of Health/Children with Special Needs

OVERVIEW HIGHLIGHTS AND NOTABLES:

The Autism Spectrum Program (ASP) uses evidence-based interventions to support children. Interventionists receive supervision and training in the principles of Applied Behavior Analysis (ABA) and autism.

Clients receive services that are:

- **outcome-focused** to assure ABA treatment is effective.
- **comprehensive** and integrate treatment across settings and individuals.
- **family-centered** to engage families in programming, while empowering them to be the most important teacher in their child’s life.

Baird School



PROGRAM DESCRIPTION

The Baird School provides multifaceted academic, social, emotional, and behavioral programming for students who experience significant challenges in these areas, equipping them with skills and strategies that will allow them to function successfully in the least restrictive educational environment available to them. Baird School is a licensed independent special education school serving students from kindergarten through eighth grade. The school has the capacity to serve 52 students; nine of these students receive intensive supports.

PERFORMANCE MEASURES

HOW MUCH

- Baird School served a total of **54 students** and their families.
- Baird School served **students from five Vermont counties** representing 13 different school districts.
- Baird School served **13 students** in the Intensive Services model.

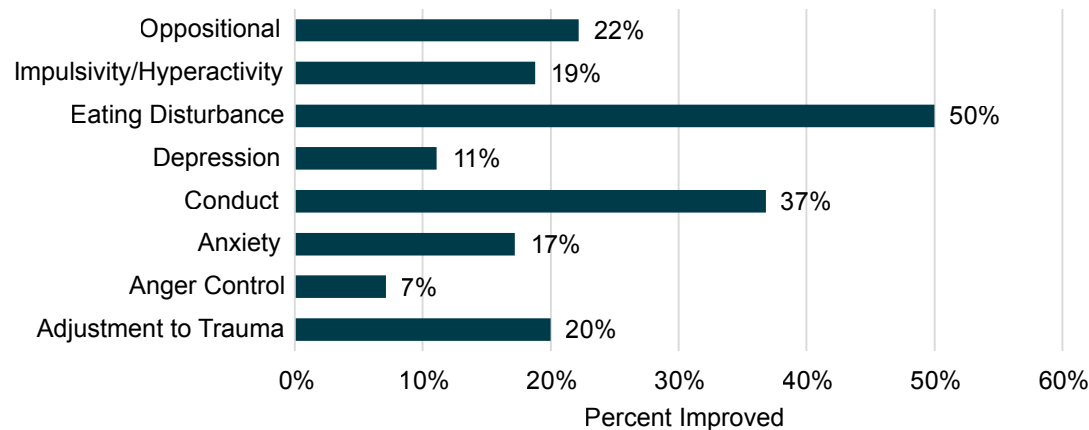
HOW WELL

- **93%** of students and families claimed staff treated them with respect; **96%** claimed the services they received had a positive influence on the referring school's relationship with the families.
- **88%** of school partners reported that the services the Baird School provided to their student would not have been accessible through another venue.

BETTER OFF

- On average, Baird School students **made a year's growth** in reading.
- **89%** of students were better able to access their education because of the services provided by Baird School.
- **Two students** were able to return to public school and needed less support.

Child and Adolescent Needs and Strengths (CANS) | Child Risk Behaviors: Percentage of Improvement



PARTNERS: Inclusive Arts Vermont; Stern Center for Language and Learning; Vermont Government Agencies: Vermont Agency of Education, Department of Mental Health

OVERVIEW HIGHLIGHTS AND NOTABLES:

“My son has had a great year at Baird. He feels safe and cared for. The staff treats him fairly and he knows they want to help him.”

—A parent

“I’m grateful for the school and staff, so blessed and thank you for all the help.”

—A parent

INCLUSION



PROGRAM DESCRIPTION

The purpose of the INCLUSION program is to provide school and home-based supports and services to clients with emotional disabilities, in order to help them find success in public school. The INCLUSION program is highly responsive to the needs of school districts, beginning services to students within four weeks of referral acceptance.

PERFORMANCE MEASURES

HOW MUCH

- INCLUSION served **35 students**, ages 4-14, and their families.
- INCLUSION provided services in **nine** Chittenden County School Districts.
- Served **13 students** in the Positive Behavior Intervention and Supports (PBIS) consultant model.

HOW WELL

- **100%** of families claimed that they received the help they needed, the services were right for them, and staff treated them with respect.
- **94%** of school partners reported that INCLUSION provided a service that is not otherwise available through school resources.

BETTER OFF

- **4 students** discharged to in-school regular classrooms with less support (16%).
- **26 students** remained in services (74%).
- **50%** of students showed improvement in school attendance.

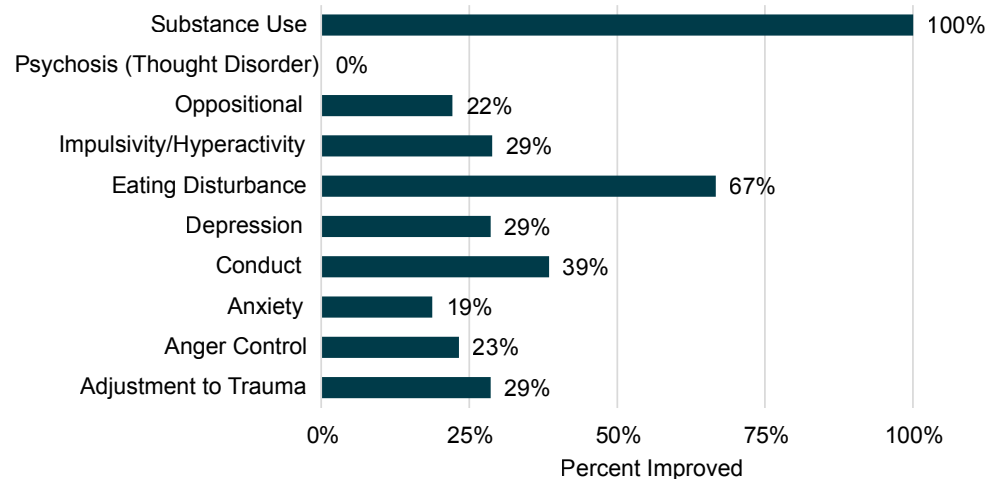
This year, 100% of students receiving INCLUSION services decreased or stabilized their level of school-based interpersonal aggression, as reflected in pre- and post-assessments.

Parents and school partners claim:

“My son had the best year thanks to this program!”
—A parent

“We could not function as a school without their support.”
—A school partner

Child and Adolescent Needs and Strengths (CANS) | Child Behavioral/Emotional Needs: Percentage of Improvement



PARTNERS: Chittenden County School Districts, Vermont Department of Mental Health, Vermont State Behavior Interventionists Directors Committee

Jean Garvin School



PROGRAM DESCRIPTION

Jean Garvin is a licensed and approved independent school for students in grades 7-12. Staff use a relational approach to therapy and restorative practices to provide therapeutic and academic supports to Chittenden County students.

PERFORMANCE MEASURES

HOW MUCH

- Jean Garvin School served **51 students** from eight Chittenden County school districts.
- During the FY23 school year, the school launched the **Delta Program**, adding **12 students** and **20 staff** to the school community.
- The school participated in the Burton Chill Program, attended Flynn Theater events, and hosted a Spring Fair for families and stakeholders.
- Students learned how to play Disc Golf, Dungeons and Dragons, make leather handbags, and plant and harvest a vegetable garden.

HOW WELL

- **100%** of Garvin School partners reported that the school provided a service that is not otherwise available.
- **89%** of the students' guardians reported that the school collaborated effectively with their student's team.
- **100%** of Garvin staff are trained in Crisis Prevention and Therapeutic Interventions and practice non-violent and collaborative communication.
- The school built and is operating a **Community Pantry** for students, families, staff, and the neighboring community.

BETTER OFF

- One student received a high school diploma; five students enrolled in classes at their public high school for part of their day; and one student returned full-time to public high school.
- The Garvin School Odyssey Team had an **active student council** during FY23. Students met regularly, sought feedback about school culture and climate, and advocated for changes. They successfully changed snack options, free-time choices and improved student morale.
- **95%** of students showed a decrease or stabilization of oppositional behavior, as reflected on their CANS analysis.

OVERVIEW HIGHLIGHTS AND NOTABLES:

When public school educators are asked why they refer students to the Garvin School, they often say that it is because students are encouraged to reach their potential, they often transition into less restrictive educational settings, and they gain the academic and emotional skills to succeed in life.

In fact, 100% of Jean Garvin School partners report that the students who attend Garvin from their district are better able to access their education because of the services the school provided.

Jean Garvin school has an ongoing relationship with the Chittenden County Regional Consortium. The consortium provides support and oversight to the school. The consortium supported the school's move and construction project and the opening of a new program co-located in that space.

"I prefer to send students to Garvin over other alternative placements, because the quality of educational and therapeutic supports seems better than other local options."

—A school partner

"My student had a better experience with academics compared to their sending high school."

—A student guardian

PARTNERS: Chittenden County Regional Consortium

School Services



PROGRAM DESCRIPTION

School Services collaborates with school teams and families to address the challenges that prevent youth from experiencing healthy development and school success. School Services Clinicians (SSC) provide intensive youth and family-focused mental health, care management and problem-solving support. They act as the link between home, school, and community. Additionally, they integrate into the school team and offer school-wide mental health prevention, intervention, and crisis consultation.

PERFORMANCE MEASURES

HOW MUCH

- School Services has **67 masters-level clinicians** and three interns working in 50 schools and/or alternative programs across eight districts.
- School Services served **818 formal clients** and **1,321 informal clients**.
- School Services made **1,459 referrals** to Howard Center or other community organizations.

HOW WELL

- **93% of students agree** that they received the help they needed from the School Services clinician.
- **97% of caregivers agreed** or strongly agreed that the School Services clinician and School Services had a positive impact on their relationship with the school.
- **96% of school partners agreed** or strongly agreed that their school is better off because of their relationship with Howard Center School Services.

BETTER OFF

- **83% of clients** improved or sustained academic growth.
- **87% of clients** showed improved or sustained behavioral growth in school.
- **85% of clients** improved attendance or did not have attendance struggles.
- **89% of caregivers** reported their student's and/or their quality of life improved because of services they received.



“They never gave up on me and were always there for me no matter how much I messed up. They have done so much for me and my family. The School Services Clinician is an amazing person and will forever be one of my favorite people. The most helpful thing they ever did for me, and my family, was to give me opportunities.”

—A student

OVERVIEW HIGHLIGHTS AND NOTABLES:

School Services serves each school's most at-risk students (as identified by the school team). Most clients experience multiple and significant personal, family, and community stressors.

School Services clients have an average of 3.63 Adverse Childhood Experiences, as defined by the CDC-Kaiser ACE study. (A score of three is considered high and may indicate chronic physical, emotional, and mental health issues in later life.)

PARTNERS: Chittenden County community service providers, eight local school districts, numerous organizations and municipal entities, University of Vermont Medical Center, and the Vermont Department for Children and Families



Residential Services

Our residential services support people in many different types of living situations to accommodate individual support needs and preferences, including apartments, group homes, therapeutic community residences, and shared living and other innovative living models.



We partnered with first-year medical students from the University of Vermont Larner College of Medicine on a project at one of our programs.

Family Supportive Housing



PROGRAM DESCRIPTION

The Family Supportive Housing program (FSH) is a collaboration between the State of Vermont, the Committee on Temporary Shelter (COTS) and Howard Center (HC), with the goal to move families more rapidly from shelter and state-funded motel stays into housing. Clinicians address barriers and assist families to make lifelong sustained changes to break the cycle of homelessness.

PERFORMANCE MEASURES

HOW MUCH

- **32 families** received services.
- Howard Center clinicians provided clinical services to **23 families**.
- **FSH clinicians offer clinical and life skills assistance to each household**, including therapeutic individualized counseling to improve family functioning, parenting education, and life skills.

HOW WELL

- **100%** of families who responded to surveys reported that they would recommend this program to others.
- **100%** of families who responded to the Satisfaction Survey reported that their quality of life had improved because of the services they received in Family Supportive Housing.
- Clinical services are provided by **licensed clinicians**.

BETTER OFF

- **13 families** graduated from Family Supportive Housing.
- **100%** of families said the services provided by Family Supportive Housing were helpful to them.
- At the time of discharge, **100%** of families were in stable housing, **99%** were up to date on their rent, and **100%** were in good standing with their landlord.

“**[Our clinician] was a great advocate for me and my family. . . .**”

—A client



“**[Our clinician] was amazing and very knowledgeable. She was very accommodating and easy to talk to.**”

—A client

OVERVIEW HIGHLIGHTS AND NOTABLES:

In February 2023, the COTS Family Supportive Housing case manager left the program. In May 2023, the family clinician left the program.

As of the end of the fiscal year, no care managers or family clinicians had been hired to fill the vacant positions.

PARTNERS: Burlington Housing Authority; Champlain Housing Trust; Champlain Valley Office of Economic Opportunity; Chittenden County schools; Committee on Temporary Shelter; Lund Child Care; Trinity Child Care; Vermont Government Agencies: Department for Children and Families/Family Services and Economic Services

Park Street Program & Fay Honey Knopp School



PROGRAM DESCRIPTION

The Park Street Program is a community-based residential treatment program serving adolescent males ages 12-17 with sexually problematic behavior. Fay Honey Knopp educates students in grades 7-12 who reside at the Park Street Program. The goal is to provide each youth with the skills necessary to safely reintegrate back into their communities.

PERFORMANCE MEASURES

HOW MUCH

- **10 youth** received services.
- **Six youth** referred for assessment and **four** referred for long-term treatment.
- **Two referrals:** one accepted for admission; one denied placement.
- **18 months** average length of stay.

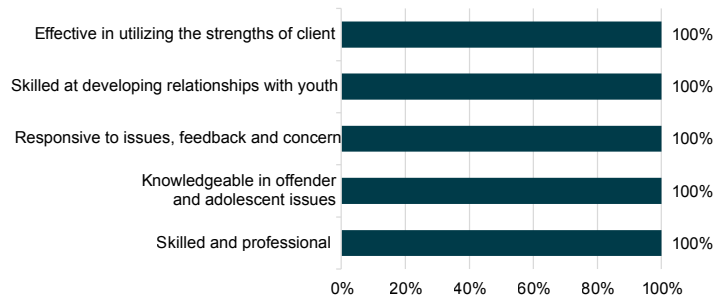
HOW WELL

- **100%** of referring agencies and school districts claim the program addresses each student's individual needs.
- **100%** of clients, families, and referral agencies report they received the help they needed.
- **100%** of clients and families report staff use their strengths to work effectively with them in treatment.

BETTER OFF

- **0% recidivism** for sexual abuse for five years following successful discharge.
- **100%** of clients who were discharged to a less restrictive setting maintained the gains made over six months.
- **100%** of clients report their quality of life improved.

Referral Agency Percent Agreeing About Park Street Program



“The Park Street program operates seamlessly. The administrative team — nursing/medical, psychiatric, clinical, educational, counselors — are by far the best staff I have ever had the pleasure of working with.”
—A community partner

PARTNERS: Adoption agencies; foster parents; HireAbility Vermont; local colleges; local school districts; network of providers that work with youth who have sexually problematic behaviors; Rutland community; Vermont Coalition of Residential Providers; Vermont Designated Agencies; Vermont Government Agencies: Agency of Education, Department for Children and Families, Department of Labor, Department of Mental Health; Vermont Youth Development Program

OVERVIEW HIGHLIGHTS AND NOTABLES:

The Park Street Program and Fay Honey Knopp School continue to provide exemplary services, based on client satisfaction surveys and client ability to develop and maintain new skills.

The data collected indicate that staff possess a strong skillset and demonstrate the ability to provide effective residential programming to treat sexually problematic behavior.



Substance Use Services



Howard Center's mobile outreach unit at the Coming Together Addiction Summit at the Champlain Valley Expo.

Our substance use services vary in intensity from short- to long-term recovery support. They include therapeutic counseling, recovery support, and medications for opioid use disorder.

Chittenden Clinic



PROGRAM DESCRIPTION

The Chittenden Clinic is a federally certified opioid treatment program (OTP) that provides medication treatment for opioid use disorder, including methadone, buprenorphine, and offers comprehensive behavioral health and support services.

PERFORMANCE MEASURES

HOW MUCH

- **1,271 clients** were served.
- On average, the Clinic served **993 clients monthly**.
- **95%** of clients served by the clinic had or were able to obtain health insurance.
- **88%** of clients had a mental health diagnosis in addition to opioid dependence.

HOW WELL

- **74%** of clients were retained 90 days or more.
- **90% agreed** that they were receiving services that were right for them.
- The **time** between first service at the Chittenden Clinic and first dose of medication averaged **less than one day**.

BETTER OFF

- **66%** of clients stopped using after 90 days in treatment.
- **24%** of clients who received buprenorphine at the Chittenden Clinic (10% of the Chittenden Clinic's overall census) were able to transfer to a lower level of care.
- **92%** of clients claimed the services they received made a difference in their lives.



"I am a better person now than I was before, with your help. Thank you!"
—A client

"Without them I'd be dead, so I'm super grateful."
—A client



In FY23, the Chittenden Clinic was recognized by the National Committee for Quality Assurance (NCQA) as a patient-centered medical home.

OVERVIEW HIGHLIGHTS AND NOTABLES:

Chittenden Clinic also provides individual and group counseling, behavioral therapies, service coordination and care management, educational resources, and medical and psychiatric services.

In the three-year accreditation from the Commission on Accreditation of Rehabilitation Facilities (CARF), the reviewers noted the Clinic's strengths:

- "Utilization of evidence-based practices"
- "Dedication to quality improvement processes"
- "A commitment to addressing the needs of the community"

PARTNERS: Chittenden County Opioid Alliance; Community Health Centers; Lund; Special Services Transportation and Medicaid transportation; Turning Point Center; University of Vermont Medical Center; Vermont Government Agencies: Department of Children and Families/Family Services, Department of Corrections, Vermont Human Trafficking Task Force

Safe Recovery



PROGRAM DESCRIPTION

Safe Recovery provides free support throughout the recovery process, from active use to sustained recovery, including during periods of relapse. The program seeks to reduce the incidence of drug-related harm, such as a fatal drug overdose.

PERFORMANCE MEASURES

HOW MUCH

- **282 Vermonters** became new members of the syringe exchange.
- The syringe exchange was visited **10,358** times.
- Safe Recovery's low barrier Medications for Opioid Use Disorder (MOUD) helped **229 clients**.

HOW WELL

- **100%** of Safe Recovery clients reported that staff treated them with respect.
- **100%** of Safe Recovery staff are trained in harm-reduction therapeutic interventions.
- In FY23, Safe Recovery launched **on-site Hepatitis C screening and treatment**.

BETTER OFF

- **179 clients** were referred to treatment, and 102 links to treatment were tracked.
- **41 low-barrier spoke clients** transferred services.
- **100%** of Safe Recovery clients reported the services made a difference.
- Over **500 wound treatment kits** were distributed to individuals challenged by xylazine related injuries.



“My staff involvement has been top notch at Safe Recovery and has been the best thing in my recovery.”

—A client

OVERVIEW HIGHLIGHTS AND NOTABLES:

Safe Recovery's syringe service offers syringe exchange, free Narcan® (opioid overdose reversal medication) and overdose prevention training, fentanyl testing strips, HIV and Hepatitis C testing, as well as linkage to care, care management, Hepatitis A/B vaccinations, and a legal clinic.

Safe Recovery also offers on-demand drug treatment for opioid use disorder. Our low-barrier buprenorphine program provides same-day access to lifesaving medication and wrap-around support services, such as counseling and care management.

The recent rise of fentanyl, xylazine, and stimulants is undercutting the effectiveness of addiction medications. Neither Suboxone® nor methadone is designed to treat addiction to xylazine or stimulants.

PARTNERS: Chittenden Clinic, Community Health Centers, Howard Center Street Outreach, Turning Point Center, University of Vermont Medical Center, Vermont Department of Health

Transition House (T-House)



PROGRAM DESCRIPTION

Transition House is an unlocked residential program for adolescents who were assigned male at birth, ages 16-22. T-House provides a safe and structured living environment to continue therapeutic treatment for trauma, mental health challenges, substance use, and legal involvement, and helps residents build independent living skills.

PERFORMANCE MEASURES

HOW MUCH

- **Master-level clinicians** provide individual and family therapy.
- In FY23, **33%** of Transition House clients were supported by the Department of Mental Health; **66%** were supported by the Department for Children and Families.
- **66%** of the clients served were from outside of Chittenden County.

HOW WELL

- In FY23, **100%** of clients engaged in individual and/or substance use therapy; spent successful time in the community with a family member, friend, or mentor; maintained appropriate natural supports at work, school, or extracurricular activities.

BETTER OFF

- **83%** of clients were employed and maintained their employment during their stay.
- **100%** of clients were either engaged in high school education or completed high school.
- **100%** of employed clients saved at least half of their income to prepare for independence.

OVERVIEW HIGHLIGHTS AND NOTABLES:

Transition House works with at-risk, transition-age youth who have experienced significant events in their lives, such as neglect, abuse, and mental health struggles. Often, clients have experienced multiple significant events, including personal, family, and community traumas.

Transition House uses a harm-reduction model to help clients make healthy and positive decisions and gain access to services and supports.

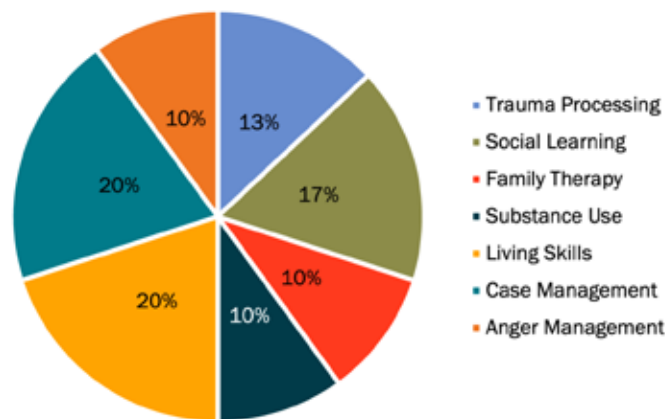
“It means a lot how much you’ve supported me and been here for me, it really does.”

—A client

“This is the only place that I can do what I need to do to get ready for life after I turn 18.”

—A client

Identified Treatment Areas FY23



PARTNERS: Local businesses; mentoring organizations; outdoor education experience programs; school systems; Vermont Government Agencies: Department for Children and Families and the Department of Mental Health.

Treatment Courts



PROGRAM DESCRIPTION

Treatment Courts support high-needs, high-risk individuals who are currently involved in the criminal justice system and are living with substance use or serious mental health disorders. The goals of the program are to provide treatment, avoid incarceration, help individuals develop healthy lifestyles, and increase social connections to generate long-term rehabilitation.

PERFORMANCE MEASURES

HOW MUCH

- **76 clients** were served.
- Howard Center provides **clinical care management and treatment** for six treatment courts: two re-entry, pre-trial recovery, drug, co-occurring, mental health, and family.

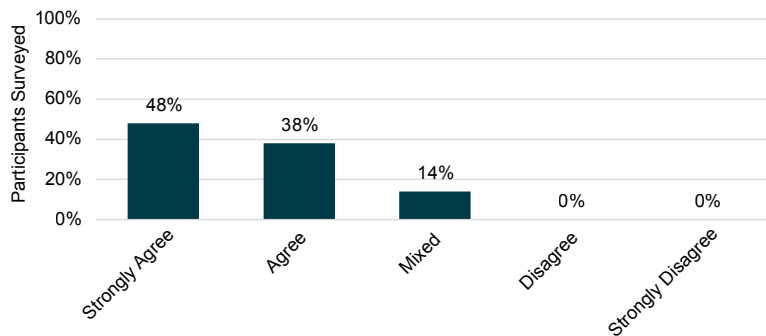
HOW WELL

- **All** participants are engaged in the criminal justice system and otherwise would be incarcerated.
- **All** participants are engaged in intensive care management.
- Participants have the opportunity to engage in a variety of therapeutic, recovery-oriented support groups and counseling.

BETTER OFF

- **14 participants** graduated from treatment court and established sobriety from all non-prescribed substances.
- Participants attained **long-term, gainful employment/careers** with growth opportunity, expunged or reduced their legal records, and regained their driving privileges.
- Participants feel more **hopeful** and have an increased sense of **self-worth**.

The Services Made a Difference for Me



“If it wasn’t for this program, I wouldn’t have my son.”
—A client

OVERVIEW HIGHLIGHTS AND NOTABLES:

Participants in the Treatment Court program develop long-lasting, non-judgmental relationships with program staff; they increase their self-esteem and self-worth; and they develop community relationships and important life skills.

Treatment Court staff identify each individual’s needs, and participants are given the opportunity to access community-based supports.

“This program has really helped me find new ways to cope without making my life harder or hurting others.”
—A client

“I have never trusted the [criminal justice] system. I realize now you all are trying to help me.”
—A client

PARTNERS: ANEW Place, Burlington and Winooski Recreation Departments, Burlington Police Department, Champlain Valley Office of Economic Opportunity, Committee on Temporary Shelter, Community Justice Center, community supports, First Step Recovery, Food Shelf, Hope Works, Howard Center, Lund, NAMI, Oxford House, Phoenix House, Planned Parenthood, Salvation Army, SASH, Steps to End Domestic Violence, Turning Point Center, Vermont Foundation for Recovery



Outpatient Services



Our outpatient programs provide therapeutic counseling for mental health and/or substance use issues for Chittenden County children, adolescents, adults, and families in individual and group settings.

Integrated Outpatient Services

(Reach Up, Treatment Courts, Eldercare, Mental Health and Substance Use Disorder Services, and SPOKE services)



PROGRAM DESCRIPTION

The goal of the Integrated Outpatient Services program is to ensure immediate access to mental health and/or substance use treatment and to help clients by providing a wide range of co-occurring and family-oriented treatment options.

PERFORMANCE MEASURES

HOW MUCH

- **1,272 clients**, ages 18-87, were served at 855 Pine Street; **484 youth clients** were served at 1138 Pine Street.
- **991 clients** received medications for opioid use disorder in an outpatient setting through the Howard Center Spoke Program.
- Outpatient services are embedded at 20 different schools, a primary practice, a private clinic, and economic services.
- Of the **2,668 clients** served across outpatient programming 1,177 identify as female, 1,373 identify as male, 33 are non-binary/gender fluid, and 60 identify as transgender.

HOW WELL

- **100%** of adult clients who responded to a satisfaction survey agreed that they were treated with respect.
- **100%** of caregivers for youth clients agreed that they received the help they needed for their child.
- **85%** of youth served by outpatient services completed an assessment within the past six months.
- **100%** of staff are fully trained in trauma-informed care.

BETTER OFF

- **83%** of clients who responded to the satisfaction survey agreed/strongly agreed that their quality of life improved because of the services they received from Howard Center outpatient programs.
- According to clinical assessments, of the children/youth who received outpatient services at 1138 Pine Street, **100%** exhibited a decrease or stabilization of need related to anxiety and **98%** exhibited a decrease or stabilization of need related to anger control.
- **48%** of clients showed improvement at discharge from outpatient services.

“[Outpatient Services] allowed me to talk about my daily life and how things are going. It helped me open up and allowed me to try new things.”

—A client

PARTNERS: Age Well, Brattleboro Retreat, Community Health Improvement, Milton Family Practice, Milton Primary Care, Richford Primary Care, SASH, schools, U.S. Probation Office, University of Vermont Health Network, Valley Vista, Vermont Department for Children and Families

OVERVIEW HIGHLIGHTS AND NOTABLES:

Howard Center’s Outpatient Services offers professional, confidential and goal-directed counseling; psychotherapy; groups; psychiatric consultation; clinical consultation; and support to individuals, children, and families struggling with mental health, substance use, behavioral, and/or intellectual disorders.

Our Outpatient Programs continue to see high demands for services. There has also been an increase in the acuity and complexity of clinical presentations. Co-occurring disorders, combined with a diverse array of psychosocial stressors, have challenged staff to be flexible and adaptable in treatment approaches. This has resulted in more resources needed to treat the level of need. Also, the potency of the drug supply has led to significant negative outcomes for the community and clients struggling with SUD and has required staff to adapt creative treatment approaches to mitigate challenges.

The most common treatment needs of youth, based on the Child and Adolescent Needs and Strengths (CANS), include:

1. Anxiety
2. Impulsivity Hyperactivity
3. Adjustment to Trauma
4. Anger Control
5. Oppositional Behaviors
6. Depression