

Supporting Pediatric and Perinatal Providers

IMPACT REPORT 2024 - 2025





Dear Partners and Colleagues,

It is our honor to share this impact report for the Vermont Consultation & Psychiatry Access Program (VTCPAP). At its core, VTCPAP is about access: ensuring children, youth, and perinatal patients can receive timely, evidence-based mental health care in the communities where they live.

By equipping primary care and perinatal providers with consultation, training, and resources, VTCPAP makes mental health care more readily available. This supportive intervention means that many patients with mild to moderate needs can be cared for safely and confidently in their medical home, without nonessential referrals to higher levels of care. As a result, those who need more intensive treatment are more able to access it, while families remain connected to trusted providers close to home.

This is what rural healthcare transformation looks like: meeting people where they are, strengthening the frontlines of care, and reducing barriers that too often leave Vermonters waiting. Looking ahead, to preserve and expand these gains, sustainable funding will be essential, ensuring that Vermont's families and providers continue to benefit from this vital program well into the future.

Thank you to our dedicated providers, partners, and funders who make this work possible. Together, we are creating a stronger, more accessible system of care for Vermont families.

With appreciation,

Hillary Wolfley, MSPH Executive Director

VPQHC
Vermont Program for Quality in Health Care, Inc.

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SUMMARY.....

The Vermont Consultation & Psychiatry Access Program (VTCPAP) helps children and perinatal patients with mental health needs access appropriate care faster.

We **build capacity** for pediatric and perinatal providers through real-time psychiatric consultation, training, and resources, so they can confidently care for patients with mild to moderate mental health needs immediately in their primary care hub.

MISSION ·····

Enhance the mental health care infrastructure and improve **access** to high quality, evidence-based mental health care for children, youth, and perinatal patients in Vermont.

HOW WE SUPPORT PRIMARY CARE AND PERINATAL PROVIDERS



PCPs & perinatal providers gain access to immediate support and consultation.

Patients with mild to moderate mental health needs receive excellent care within their medical home.





PCPs receive resource and referral support to help families access services and navigate complex systems of care.

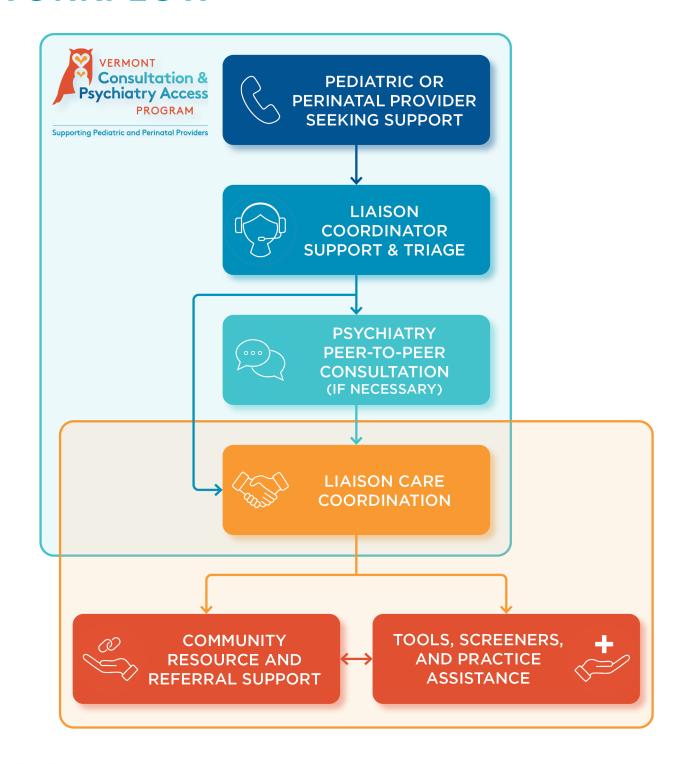
Some patients will no longer need referrals to a higher level of care.





Patients with higher needs have improved access as waitlists are reduced.

WORKFLOW ·····



VTCPAP is super helpful, especially for a small practice like mine, where we do not have the volume or the ability to have an embedded person...This service is crucial and helpful for small practices.

- Vermont Primary Care Provider

Supporting and sustaining primary care is essential to Vermont families.

WE.....

IMPROVE WORKFORCE RETENTION

85% of PCPs surveyed report better work lives due to VTCPAP support.

IMPROVE HEALTHCARE ACCESS AND EFFICIENCY

Managing mild-to-moderate mental health needs within primary care is more efficient than requiring referrals to higher levels of care. ~60% of PCPs surveyed said they would have referred out without VTCPAP services.

SUPPORT THE VERMONT WORKFORCE

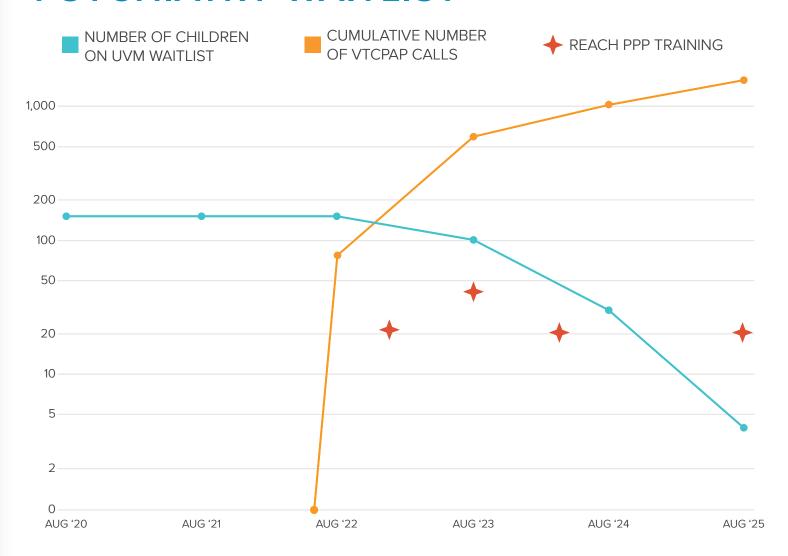
When children receive timely, appropriate mental health care, they are better able to thrive in school, and caregivers remain in the workforce.

IMPROVE ACCESS

Since we launched, the waitlist for outpatient child psychiatry at the University of Vermont's Center for Children, Youth & Families (VCCYF) has declined from **150 children** to **4 children** waiting for care (August 2022 - 2025). While many factors influence these improvements, our team has been an important contributor.

VTCPAP advances Vermont's healthcare reform goals by strengthening primary care, reducing unnecessary system costs, and ensuring timely access to care.

VTCPAP CALLS vs. UVM OUTPATIENT PSYCHIATRY WAITLIST.....



VTCPAP has been instrumental in reducing wait times for our child psychiatry clinic. By serving as a vital 'first line of assistance' for our primary care partners, VTCPAP provides immediate psychiatric consultation for medication questions and behavioral concerns. This allows families to receive the targeted help they need without always requiring a full psychiatric evaluation, ensuring timely support while reserving comprehensive evaluation slots for other complex cases.

- Gretchen Pileggi, VCCYF Intake Coordinator

VTCPAP has completed over

1,600

consultative calls since launching

COMMON CONDITIONS PROVIDERS ARE CALLING ABOUT

Anxiety

Trauma

Obsessive Compulsive Disorder

Disruptive Behaviors

Attention Deficit/Hyperactivity Disorder

Depression

Suicidal Ideation

I strive to provide my patients a high level of mental health care in our primary care office. But when my knowledge and experience fall short of what a patient needs, I make a call to VTCPAP. The calls are focused and evidence-based and give me confidence to take the next steps. Not only am I learning with every call, but my patients receive the benefit of my access to excellent psychiatric consultation.

- Kristen Bird, R.N., F.N.P, I.B.C.L.C., Timberlane Pediatrics

STATEWIDE REACH·····

In a rural state like Vermont, VTCPAP keeps mental health care close to home, supporting local providers and reducing inequities for families across **all 14 counties**. The majority of our calls are from rural providers. We complement mental health services in Federally Qualified Health Centers (FQHCs) statewide, helping to strengthen the care they provide.

PERINATAL CONSULTATION · · · · ·

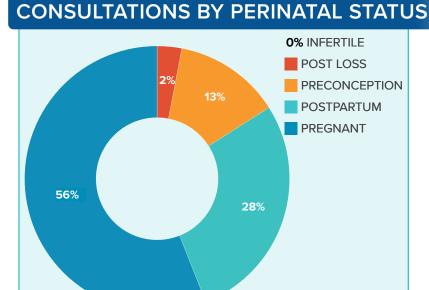
The Perinatal Psychiatric Consultation Service began in 2015. In fall 2024, VTCPAP merged with the perinatal team, expanding its scope to support both pediatric and perinatal healthcare providers.

CONTEXT

The <u>2024 Vermont Maternal Mortality Review Panel</u> report found that over <u>90%</u> of perinatal deaths occurred among individuals with mental health diagnoses—most with multiple conditions—and <u>11%</u> of maternal deaths since 2012 were due to suicide.

HOW WE HELP

VTCPAP's perinatal service supports providers caring for patients who are pregnant, postpartum (up to one year+), or breast/chest-feeding,



as well as those seeking preconception consultation. Providers can consult directly with a psychiatrist trained in perinatal mental health & medication safety, receiving evidence-based guidance on screening, assessment, diagnosis, and treatment of perinatal mood and anxiety disorders.

Since merging with VTCPAP the perinatal service has:

Completed over 100 consultations.

Consulted with providers in 10 of Vermont's 14 counties.

Registered 42% of OB/GYN and midwifery clinics in Vermont.

The VTCPAP perinatal support program has been an invaluable resource. Dr. Guth has truly been a game changer—at times, even a lifesaver—for our perinatal patients. Her timely, compassionate guidance allows us to provide appropriate psychiatric support quickly, especially when medication management is needed. Her responsiveness and deep understanding of the unique needs our patients face during this critical time makes a profound difference. I'm deeply grateful for this program; I honestly can't imagine how we would meet our patients' needs without it.

- Emily Zolten, CNM, NP Porter Women's Health

CAPACITY BUILDING & EDUCATIONAL OFFERINGS

We help expand access to high-quality, evidence-based care for Vermonters by providing robust trainings for medical and mental health professionals; adapting to quickly provide training when there is an identified gap in needed services.

Training providers strengthens Vermont's primary care & mental health workforce.

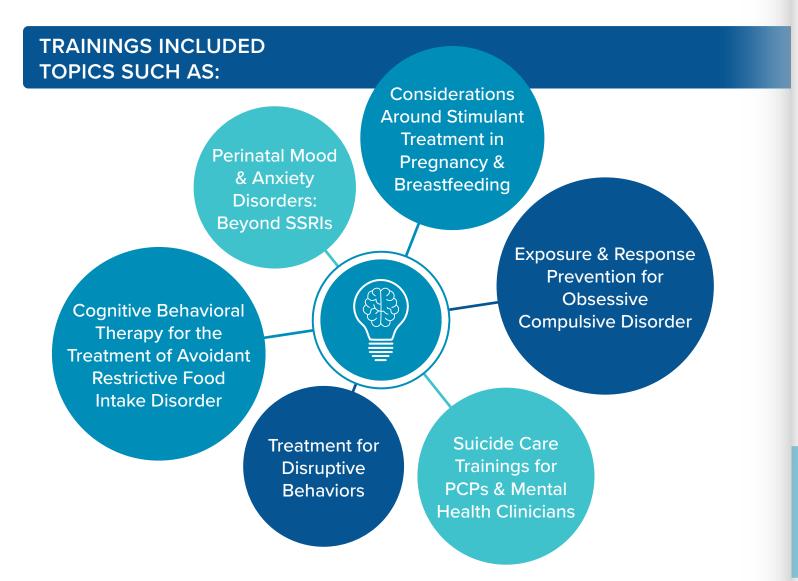
In collaboration with state partners, VTCPAP has delivered:

24 TRAININGS

IN THE PAST YEAR

687+ ATTENDEES

ACROSS PEDIATRIC AND PERINATAL SPECIALTIES



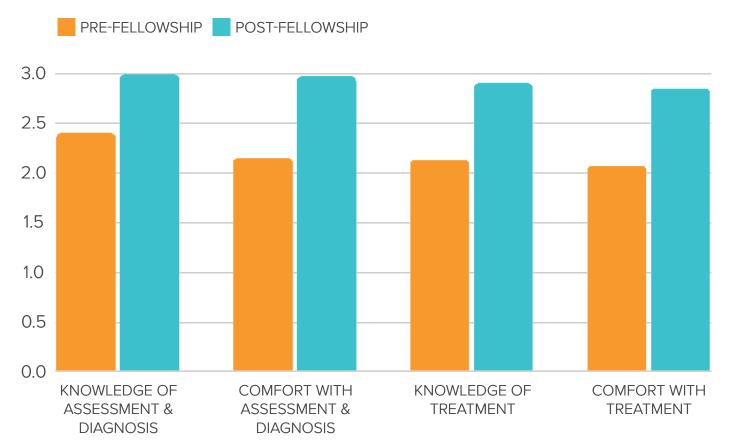
Since 2022, we have sponsored 111 primary care providers to complete a minifellowship to strengthen pediatric mental health skills and confidence.

95%
OF PARTICIPANTS

reported increased confidence in assessing common mental health concerns in pediatric patients.

PRE AND POST IMPROVEMENT

*CHART DISPLAYS AVERAGE SCORES ON A 1-4 LIKERT SCALE ASSESSING INCREASES IN KNOWLEDGE AND COMFORT OF COMMON MENTAL HEALTH CONCERNS.



This [fellowship] provided me with more in-depth knowledge and resources regarding pediatric mental health. I am now much more confident in my practice and ability to handle these cases.

- Mini Fellowship Learner

SUICIDE CARE ·····

Suicide is the <u>second leading cause of death among U.S. children</u>. We increase provider capacity to deliver life-saving, evidence-based suicide care.

VTCPAP trained medical and mental health providers in key areas, including:



In partnership with the <u>Vermont Program for Quality in Health Care</u>, we promoted additional trainings—such as



Our practice often makes referrals to higher levels of care for suicidality. However we struggle to find the right fit, availability and level of more immediate care within our team or community. VTCPAP has allowed us to provide patients with quick, reliable, accessible therapists who can address suicidality and care for our patients. We feel this program has allowed for increased follow up treatment and ongoing high quality care after visits to the emergency department, inpatient unit, or suicidal ideation from kids in their doctors' visits.

- Carter Bradshaw, MSW, Essex Pediatrics

In the past year, 11% of VTCPAP consultations directly addressed suicide-related concerns, offering primary care providers:

Immediate Support

Clinical Guidance

Referral Assistance

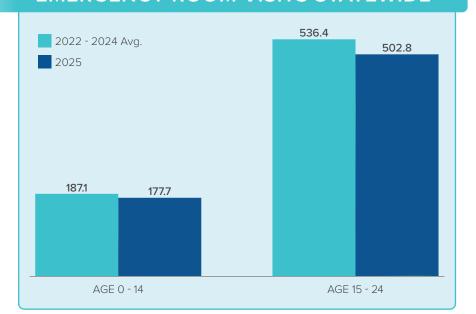
VTCPAP continues efforts to provide real-time education to PCPs to include suicide care as a standard in all of their work.

We empower primary care providers to manage patient care with confidence, connect families to appropriate community resources, and reduce unnecessary use of higher levels of care, ensuring these services remain available to those who need them most.

I referred a teen with Suicidal Ideation (SI), very high depression screening. Family was resistant to medication and therapy intervention due to prior history. However, with VTCPAP's help finding an accessible and experienced clinician, this teen has seen a significant decrease in depression scales, no longer has high concern to warrant medication intervention, and has consistently had negative SI reports over the last 6 months. This connection has also been reportedly a great support for the family.

- Vermont Primary Care Provider

EMERGENCY ROOM VISITS STATEWIDE



STATE DATA SHOW THAT

department visits for children (ages 0-14) and youth (ages 15-24) in Vermont declined (2022-2024). While many factors contributed to this trend, VTCPAP has played an important role supporting referring providers to have more options during this period.

ACKNOWLEDGMENTS ·····

Partnership, collaboration, and a state-level lens are key to our work and success. We could not have met key benchmarks without these strong relationships.

VTCPAP's fiscal sponsor is the <u>Vermont Program for Quality in Health Care</u>, adding a robust quality improvement focus to our service.

FUNDING ··

VTCPAP is a public program supported through multiple sources. Pediatric funding is scheduled to **conclude in September 2026**, and perinatal funding in **September 2028**.

SECURING SUSTAINABLE FUNDING WILL BE ESSENTIAL TO ENSURE VTCPAP CAN CONTINUE PROVIDING THIS CRITICAL ACCESS.















This program is supported by the VT DMH Pediatric Mental Health Care Access Program (PMHCA), the VT Dept of Health Maternal Mental Health and Substance Use Disorders Program (MMHSUD), and the Four Pines Fund. The Health Resources and Services Administration (HRSA), Department of Health and Human Services (HHS) provided financial support for this program. The award provided 83% of total costs and totaled \$820,998. HRSA also provided financial support for the VT MMHSUD program as part of an award totaling \$666,666 with 10% financed with non-governmental sources and matched Medicaid administrative funds. The contents are those of the author. They may not reflect the policies of HRSA, HHS, or the U.S. Government.

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Centers for Disease Control and Prevention. (2023, June). Suicide - health, United States. Centers for Disease Control and Prevention. https://www.cdc.gov/nchs/hus/topics/suicide.htm

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