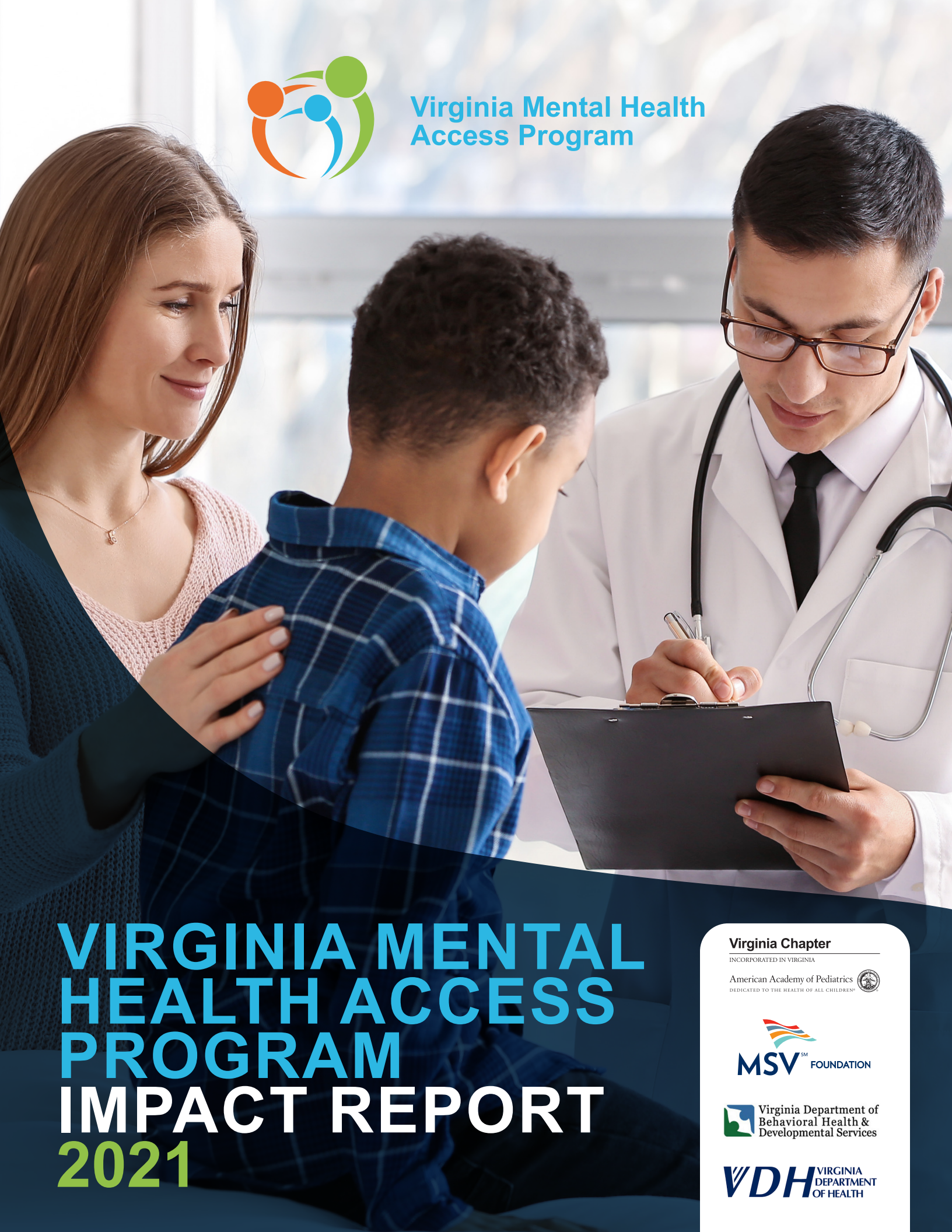




Virginia Mental Health
Access Program



VIRGINIA MENTAL HEALTH ACCESS PROGRAM IMPACT REPORT 2021

Virginia Chapter

INCORPORATED IN VIRGINIA

American Academy of Pediatrics
DEDICATED TO THE HEALTH OF ALL CHILDREN®



CONTENTS

Letter from VMAP's Medical Director	3
Meet the Staff	4
How VMAP Works	6
Why VMAP	7
History of VMAP	8
Expansion and Implementation	10
Findings and Outcomes	15
Funding and Partners	23
Executive Committee	24



LETTER FROM VMAP'S MEDICAL DIRECTOR

In our practices every day, we are taking care of children and adolescents who are struggling with mental health conditions. The challenges and barriers facing our youth and their families to access mental health care in their communities are staggering. All of us at the Virginia Mental Health Access Program (VMAP) are proud to play a role in being part of the solution to address this crisis.

The last few years have been, at times, the slowest and, at other times, the fastest years of our lives. The trauma of the pandemic has exacerbated a pre-existing crisis in youth mental health. As we work towards recovery and the building of resilience among our most vulnerable, VMAP continues to strive to provide access to mental health care at the right time, in the right place. Over the past year, we have expanded the program across the state so that we now have hubs in every region. Now, any child, adolescent, or young adult up to age 22 can potentially get access to mental health services if needed.

"VMAP has been a lifesaver," said a pediatrician who uses the consult line at least once a month. "The child psychiatrist answers my questions almost in real time, and I can take care of my patients right away."

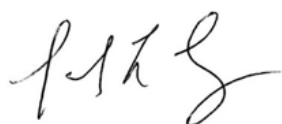
Parents have noticed too. "I didn't know what to do for my daughter who was actively suicidal, and my pediatrician was calm and knew what to do," said a mom whose child's pediatrician was trained by VMAP. Her daughter is now getting the help she needs and is doing much better.

Our health care system is complex, and our care navigators help families to figure out where to seek care. Every day we are helping providers and patients learn about and reach resources to help children and adolescents in need.

We have trained over 500 primary care providers, provided over 15,000 hours of training, and received over 1,800 calls to the VMAP line. Each of these statistics is impressive, and more importantly represents a child's mental health trajectory improved, and possibly a life saved.

Exacerbated by the pandemic, mental health concerns in our youngest and most vulnerable have been a growing concern for decades. The American Academy of Pediatrics, the Children's Hospital Association, and the American Academy of Child and Adolescent Psychiatry declared a Youth Mental Health Emergency in the fall of 2021. With suicide as the second leading cause of death for children ages 10-24, we know that the best way to address the growing mental health concerns is to work upstream. Prevention and promotion of mental wellness and resilience is paramount.

Thank you. Thank you for the support, the hard work, and the commitment over the last unprecedented years to grow and expand VMAP to meet the increasing needs. Children may only represent 25 percent of the population, but they represent 100 percent of our future adults. Let's continue to work together to build a brighter future for our children, our families, and our communities.



Sandy Chung, MD
Founder and Medical Director



MEET THE VMAP STAFF

Northern Hub Team

Licensed Mental
Health Professional
(LMHP)

**Julia Richardson,
LCSW**

Care Navigator

**Millie
DiPatrizio**

Child and Adolescent
Psychiatrist (CAP)

**Kriti D.
Gandhi, MD**

Child and Adolescent
Psychiatrist (CAP)

**Kelly Register-
Brown, MD**

Child and Adolescent
Psychiatrist (CAP)

**Rebecca
Begtrup, DO**

Child and Adolescent
Psychiatrist (CAP)

**Bhavin J.
Dave, MD**

Child and Adolescent
Psychiatrist (CAP)

**Adelaide
Robb, MD**

Western Hub Team

Licensed Mental
Health Professional
(LMHP)

**Caitlin
Anderson, PhD**

Child and Adolescent
Psychiatrist (CAP)

**John
Hendrickson, MD**

Child and Adolescent
Psychiatrist (CAP)

**Tahnee Wong-
Okafor, MD**

Child and Adolescent
Psychiatrist (CAP)

**Kara
Rooney, MD**

Child and Adolescent
Psychiatrist (CAP)

**Jim
Tucker, MD**

Child and Adolescent
Psychiatrist (CAP)

**Lakshman
Gandham, MD**

Child and Adolescent
Psychiatrist (CAP)

**Ashwini
Sakinala, MD**

Child and Adolescent
Psychiatrist (CAP)

**Jitendra
Annapareddy, MD**

Eastern Hub Team

Care Navigator

**Kimberly
Pitts**

Child and Adolescent
Psychiatrist (CAP)

**Peter
Dozier, MD**

Child and Adolescent
Psychiatrist (CAP)

**Mary Margaret
Gleason, MD**

Child and Adolescent
Psychiatrist (CAP)

**Daniel
Spencer, MD**

Child and Adolescent
Psychiatrist (CAP)

**Carl
Peterson, MD**

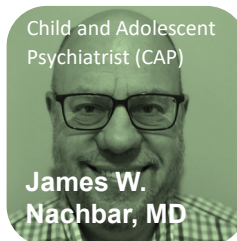
Child and Adolescent
Psychiatrist (CAP)

**Thomas
Henry, MD**

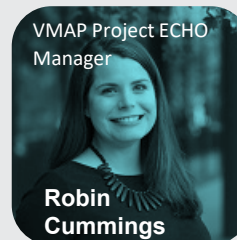
Central Hub Team



Southwestern Hub Team



Education Team



Implementation Team



HOW VMAP WORKS

What is VMAP?

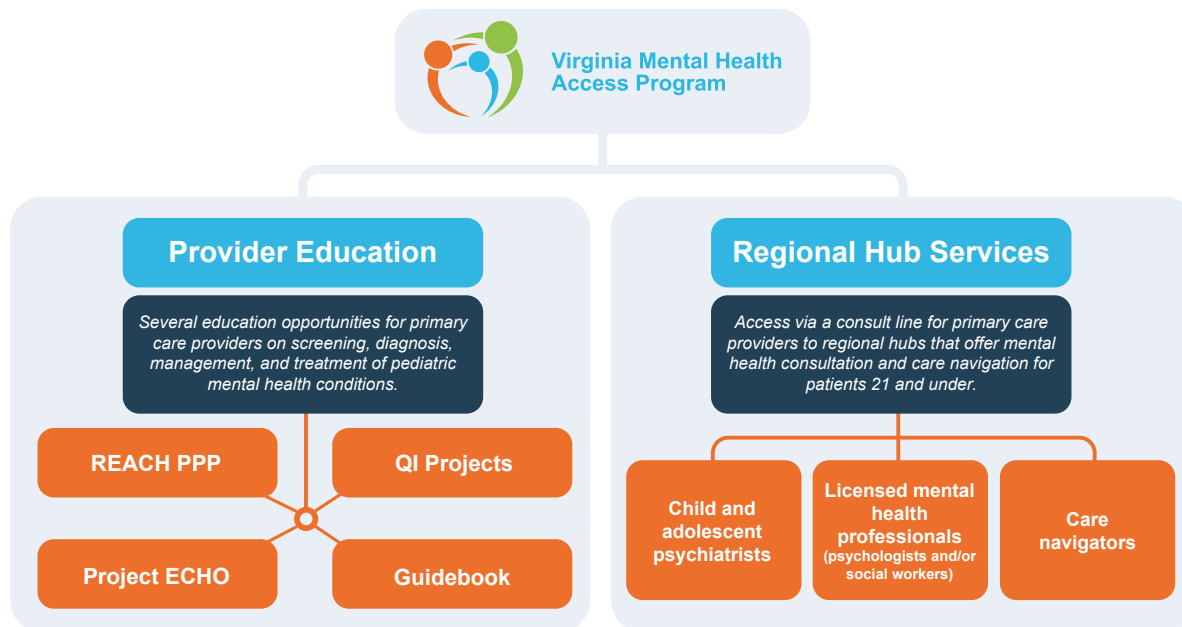
The Virginia Mental Health Access Program (VMAP) is a statewide initiative that helps health care providers take better care of children and adolescents with mental health conditions through provider education and increasing access to child psychiatrists, psychologists, social workers, and care navigators.

VMAP was created to:

- 1 Address the growing need for mental, emotional, and behavioral health resources among primary care providers treating children and adolescents within Virginia.
- 2 Mitigate the shortage and geographical disparity of psychiatric and licensed mental health professionals.

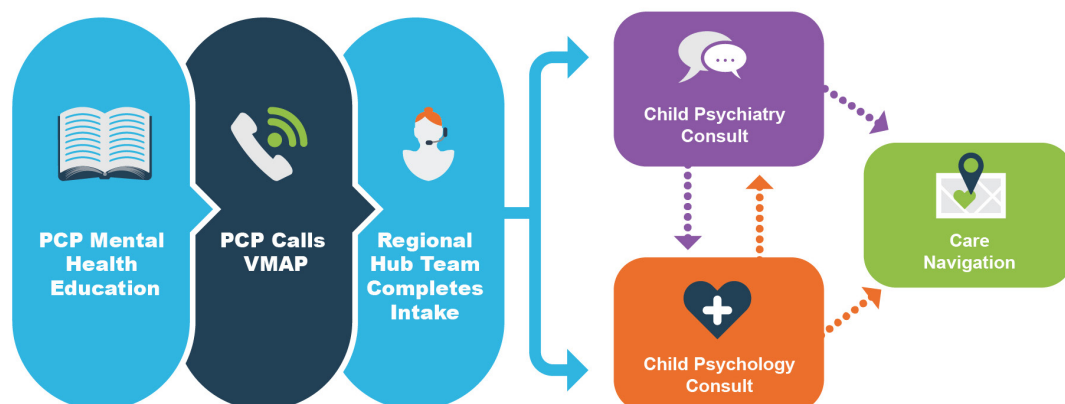
What does VMAP do?

VMAP ensures that more children have access to providers who are better able to screen, diagnose, manage, and treat their mental health through two main components:



VMAP's provider education and regional hub services are available to any prescribing health care provider treating children and adolescents 21 and under (through the 22nd birthday). Eligible providers include pediatricians, family medicine physicians, nurse practitioners, and PAs.

How VMAP Works

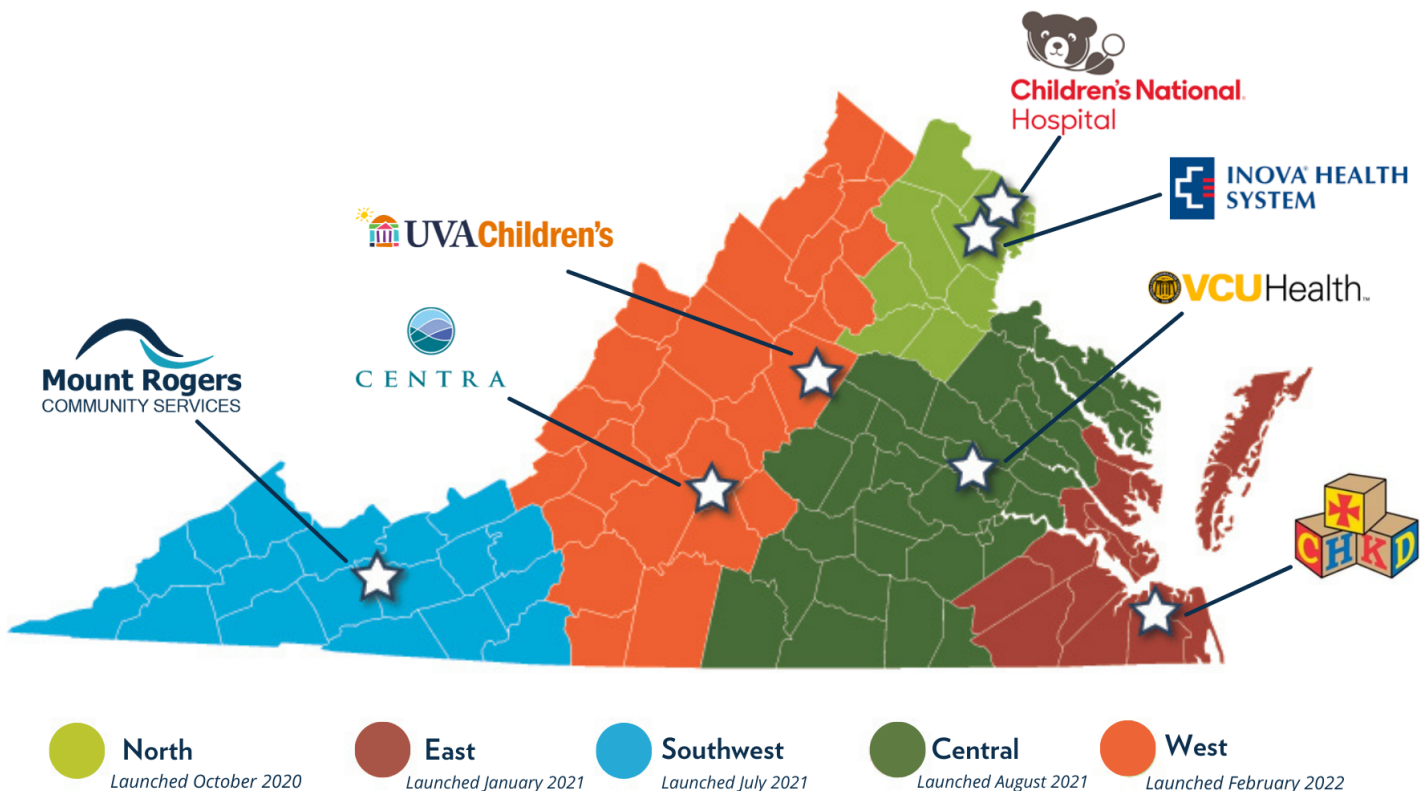


WHY VMAP?

VMAP is a statewide initiative that connects health care providers with a variety of resources to help increase their capacity and capability to manage the mental/behavioral health of their pediatric patients. VMAP is focused on supporting health care providers in addressing the growing concern, nationally and statewide, around mental illness and well-being among children and adolescents. Exacerbated by the COVID-19 pandemic, the shortage of licensed mental health professionals has become more prevalent and urgent. According to the Virginia Chapter of American Academy of Pediatrics (VA-AAP) survey in 2021, nearly 90% of providers treating children and adolescents reported seeing more patients that exhibited behavioral health symptoms such as anxiety, depression, and ADHD, since June 2020.

In tandem with mental health professional shortages both nationally and throughout Virginia, there is also a significant portion of primary care providers treating children and adolescents who do not have the tools and training necessary to support their patients with mental health needs. This was reflected in the VA-AAP 2021 survey in which two-thirds (62%) of providers reported that they did not feel they were able to meet the increasing behavioral health needs of their patients. VMAP's services, including its formal trainings and regional hub services offering behavioral health consultations, are implemented concurrently to alleviate the strain on providers caused by the increasing number of patients presenting with mental health needs, coupled with the limited availability of a mental health workforce to treat them.

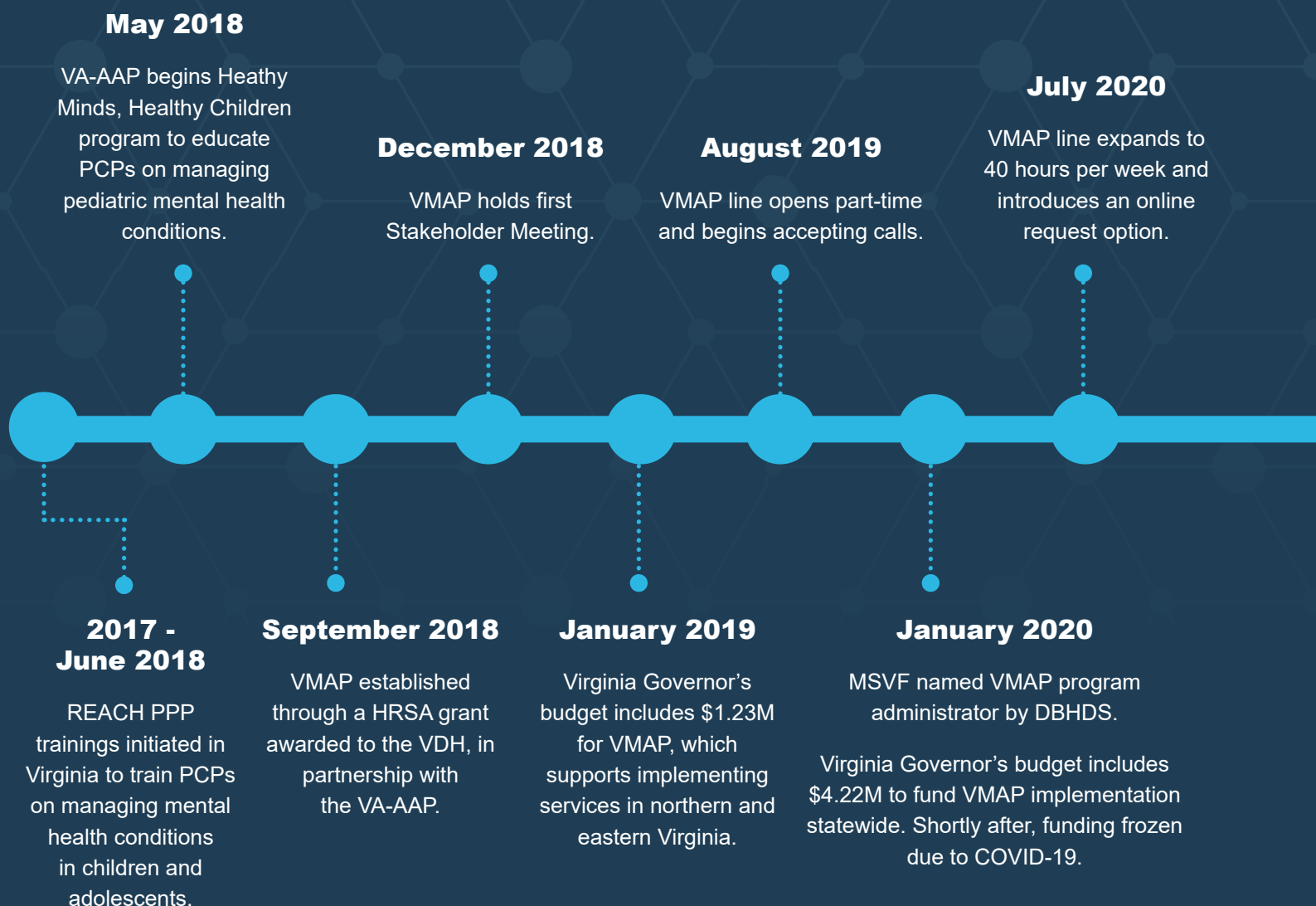
VMAP's Regional Hubs



SERVICE EXPANSION HISTORY OF VMAP

In 2019, VMAP piloted a part-time child psychiatry consult line and limited provider education made possible by the Health Resources and Services Administration (HRSA) funding via the Virginia Department of Health (VDH) in partnership with the Virginia Chapter of the American Academy of Pediatrics (VA-AAP). In 2020, VMAP secured preliminary state funding via the Department of Behavioral Health and Developmental Services (DBHDS) which enabled the next steps of expansion for all components of the program.

To prepare for implementation of the newly dedicated state funding, DBHDS named the Medical Society of Virginia Foundation (MSVF) the program administrator for VMAP. MSVF implemented a program team, who worked alongside VA-AAP and VMAP's existing partners statewide to expand its provider education programs and child psychiatry consultation line. MSVF also began work on launching VMAP's first regional hub services in two of VMAP's five regions.



October 2020

First VMAP regional hub launched offering services to northern region PCPs, in partnership with Inova and Children's National Hospital.

January 2021

VMAP launches hub services in eastern region in partnership with the Children's Hospital of the King's Daughters.

July 2021

VMAP launches hub services in southwest region in partnership with Mt. Rogers Community Services.

February 2022

VMAP line reaches 2,000 calls!

VMAP initiates first specialized Project ECHO on ages 0-5.

November 2020

VMAP funding restored during Virginia Special Session, allowing VMAP to continue expanding statewide.

May 2021

VMAP line reaches 1,000 calls.

August 2021

VMAP launches hub services in central region in partnership with VCU Health.

March 2022

VMAP launches hub services in western region in partnership with UVA and Centra.

EXPANSION AND IMPLEMENTATION

Provider Education Expansion

State funds allocated in the 2019 and 2020 General Assembly enabled VMAP to expand its provider education and training component designed to help primary care providers (PCPs) better screen, diagnose, and treat pediatric mental health. Through partnerships with the VA-AAP and UVA, VMAP's education programs are offered to Virginia PCPs treating children and adolescents on a year-round basis, at no cost*. VMAP's provider education programs include REACH PPP, Project ECHO, and QI Initiatives.



REACH's Patient-Centered Mental Health in Pediatric Primary Care (PPP) Mini-Fellowship (REACH PPP): VMAP partners with the REACH Institute to offer this innovative program that increases clinicians' comfort with assessing, diagnosing, and treating pediatric mental health concerns. REACH PPP is a dynamic three-day, 16-hour **interactive course** focused on building skills and confidence in diagnosing and treating pediatric behavioral health problems. It's followed by a six-month, case-based **distance-learning program** where participants join 12 bi-monthly conference calls with national primary care and child/adolescent psychiatry experts to learn how to manage pediatric mental health issues encountered in daily practice. Participants also receive custom-designed toolkits with guides, assessment instruments, dosing and side effect charts, medication comparison tables, and handouts for patients and parents.



Project ECHO: VMAP's Project ECHO helps PCPs integrate best practices in pediatric and adolescent behavioral and mental health care into their practice via monthly didactics and case-based virtual learning sessions. Project ECHO is a lifelong learning and guided practice model that revolutionizes medical education and increases workforce capacity to provide best-practice specialty care and reduce gaps in care. The heart of the Project ECHO model is its hub-and-spoke knowledge-sharing networks, led by an interdisciplinary team of experts who conduct virtual clinics with participant providers. In this way, participants learn to provide excellent specialty care to patients in their own communities. VMAP offers Project ECHOs on pediatric mental health year-round, organized in regional cohorts of participants to facilitate resource and knowledge-sharing networks.



QI Initiatives: VMAP's QI Initiatives are designed to help providers and practices improve screening for mental health in their pediatric patients. Through collaboration, providers treating children and adolescents work together to improve screening, management and referral processes. Participants work with a QI Coach for guided improvement work. Previous VMAP QI cohorts have included screenings for anxiety, mental health, social determinants of health, and social/emotional health.

**Providers who wish to receive CME or MOC may pay a reduced rate for some VMAP education opportunities.*

Next steps for VMAP's provider education: State funds have enabled the development of the *VMAP Guide for Promoting Child and Adolescent Behavioral and Mental Health in Primary Care* (VMAP Guidebook). The VMAP Guidebook will be a compilation of evidence-based practices, up-to-date resources, and practical knowledge specifically geared towards pediatric and adolescent health care providers and will be available on VMAP's website.

Additionally, after requests from PCPs statewide, state funds have also enabled the development of VMAP's first specialized Project ECHO that focuses exclusively on pediatric mental health for ages 0-5. This Project ECHO cohort launched in early 2022.

Launching VMAP Regional Hubs

Starting in November 2020, VMAP began providing regional hub services in Northern Virginia through partnerships with Inova Health System and Children's National Hospital. For the first time, VMAP was able to connect PCPs treating children and adolescents to local child and adolescent psychiatrists (CAPs) available for consult 40 hours a week, scaling up from the previously part-time and state-wide line. VMAP also implemented **two new regional roles** as part of the hub, the licensed mental health professional (LMHP) and care navigator:



VMAP's **care navigators** offer PCPs calling the VMAP line an additional service to support with their referral needs. VMAP care navigators work alongside PCPs and/or their patient families to help them find and connect to important resources and referrals.



VMAP's **licensed mental health professional (LMHPs)** are social workers, psychologists, and other licensed behavioral health clinicians who offer an additional level of expertise to the VMAP line. VMAP's LMHPs receive and screen incoming calls, provide case conceptualization and diagnosis support, work alongside VMAP CAPs on consultations, and oversee care navigation. Regional LMHPs work closely with their respective care navigators to ensure PCPs and their patients are directed towards the right resources based on the case, the consultation, and the patient's specific needs.

Through VMAP's partnership with the Children's Hospital of the Kings Daughters (CHKD), VMAP's second regional hub was launched in February 2021, which included a full time CAP, LMHP, and care navigator available to PCPs in VMAP's eastern region.

Why Regional Services? Regionally-based support via the VMAP line offers more tailored and customized clinical support for PCPs in that region, and subsequently their patients. VMAP's regionally-based CAPs and LMHPs are familiar with PCPs and their practices, trends and needs of the region, and availability of certain types of resources or referrals which may impact the consultation. Care navigation is specific to the region since availability of behavioral health services vary widely across the state.

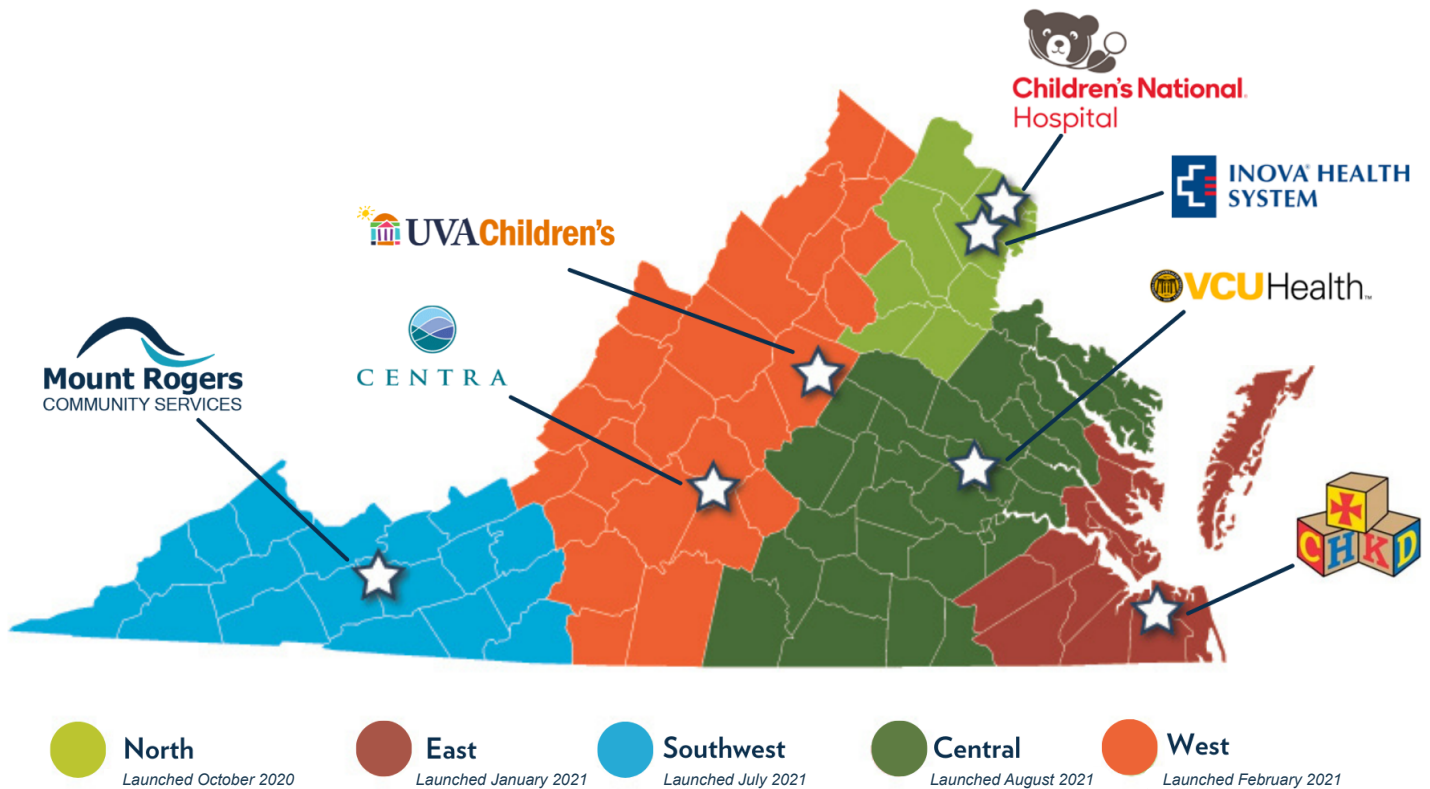


Regional Hub Services Expand Statewide

After the successful launching of VMAP's northern and eastern regional hubs in late 2020 and early 2021, the 2021 General Assembly included additional funds in the state budget to expand regional hub services to the remaining three regions of the state:

- July 2021: Southwest hub launched at **Mt. Rogers Community Services**
- August 2021: Central regional hub launched at **VCU Health**
- February 2022: Western regional hub launched at **UVA and Centra**

As a result, PCPs treating children and adolescents anywhere in the state are now able to call the VMAP line 40 hours a week and access their regional hub services, supported by area VMAP CAPS, LMHPs, and care navigators.



Operational Growth

In 2020, VMAP's executive team engaged in a strategic planning process to draft goals for its next three years of programming (2021-2024). VMAP's strategic plan is focused on six key goals:

- 1 Scaling VMAP's services by **developing staffed regional hubs** across the Commonwealth
- 2 Implementing a framework for measuring and reporting data in order to **demonstrate impact**
- 3 Developing processes that support a culture of ongoing and equitable **quality improvement**
- 4 **Enhancing VMAP's work** by expanding resources and supports to additional populations through strategic partnerships
- 5 **Improving brand awareness** through targeted outreach and marketing efforts
- 6 **Continued sustainability** through the securing of a variety of funding sources

VMAP's leaders continue to monitor progress on these goals, incorporating them into regular meetings and semi-annual reviews. A key component to accomplishing these goals has been the expansion of the VMAP implementation team. During the last two years, two leadership roles have been added to support VMAP's Program Director:

1. State Operations Manager
2. Data Analyst and Evaluator

Additionally, an Engagement Specialist was added to support and enhance VMAP's outreach efforts, coordinating with leadership, MSVF's marketing team, and enhance VMAP's outreach efforts, coordinating with VMAP's leadership, marketing, and education teams to ensure that programs are recognized and known across the Commonwealth.

In 2021, VMAP leadership decided to replace the current data system tracking calls for regional hub services with a more streamlined, integrated system that better meets the needs of the entire program. The new system is in development and is set to go live in summer 2022.

Regional and Community Engagement

As a new and growing program, a key focus in VMAP's strategic planning goals is outreach efforts across the state. Additionally, VMAP leadership envisions the program as a collaborative effort, made possible through input and partnership with many stakeholders. This takes place in a variety of ways.

Equity Advisory Committee: Recognizing existing challenges to equitable access to behavioral health care across the state, VMAP formed an Equity Advisory Committee in 2021. Comprised of VMAP staff and external community members, this group meets regularly to provide VMAP's executive committee with recommendations to support its efforts to expand and diversify program offerings and participation.

Care Navigation Advisory Committees: Launched in VMAP's first two regions (north and east), these committees help to facilitate regional communication between community behavioral health services and VMAP regional hub teams. Membership includes a diverse group of professionals and community members who meet quarterly to share information and discuss community concerns and trends. VMAP's goal is to have a care navigation advisory committee in every region in 2023.

PCP Education Workgroup: This longstanding workgroup is comprised of internal and external members who help to advise and guide VMAP's provider education programming. This group created the *VMAP Guide for Promoting Child and Adolescent Behavioral and Mental Health in Primary Care* (VMAP Guidebook), which will be available on VMAP's website.

Ongoing Outreach: Ongoing outreach with providers and the public is critical to continue to spread the word about the program, gather support, and encourage provider participation:

VMAP's regional hub teams provide **Lunch and Learn** events and other similar informational presentations to practices and provider groups in their area. VMAP regional hub teams have held over 100 Lunch and Learns to date.

VMAP's leadership team participated in numerous talks with professional organizations and associations throughout the year:

State Council of Higher Education
for Virginia (SCHEV)

Virginia Academy of Physician
Assistants (VAPA)

Virginia Health Care
Foundation (VHCF)

Virginia Council of Nurse
Practitioners (VCNP)

Virginia Community Healthcare
Association (VCHA)

Hospitals systems in rural areas
such as Ballad Health and Carilion

National Association of Pediatric
Nurse Practitioners (NAPNAP)

Virginia Association of Free and
Charitable Clinics (VAFCC)

FQHCs and Free Clinics in all
regions of the state

Virginia Academy of Family
Physicians (VAFP)

Virginia Association of Community
Based Providers (VACBP)

...and many more!

In coordination with Mental Health Awareness Month in May 2021, VMAP celebrated its statewide launch with a virtual press conference and multiple media appearances in print, tv/radio, and online. This media event included participation by then Governor Ralph Northam and then Secretary of Health and Human Resources (HHR) Dr. Daniel Carey.

In December 2021, VMAP held its annual Stakeholder Meeting. This virtual meeting was attended by over 60 people from across Virginia and included speakers from HHR, DBHDS, and VDH.

Also in 2021, the VMAP website was updated and refreshed to improve accessibility and access to key informational content. Additionally, VMAP increased its social media presence, engaging with communities on LinkedIn, Twitter, and Facebook. VMAP's Instagram launched in the Spring of 2022.



@VMAPVA

Expanding VMAP: What's next?

Under its current funding, VMAP will continue building out its current regional hub infrastructure and educational programming to meet the needs of PCPs treating children and adolescents statewide. This includes adding more regional hub team members such as care navigators to accommodate the increase in demand for regional hub services, as well as continuing to enhance VMAP's educational offerings.

Additionally, in Fall 2021, the Medical Society of Virginia worked with VA-AAP and DBHDS to submit a budget request to continue expanding VMAP to meet the increasing needs of PCPs treating children and adolescents statewide. Additional funding will begin July 1, 2022.

VMAP FINDINGS AND OUTCOMES

Methodology and Data Analytics

The VMAP data and evaluation team employed a mixed-methods evaluation approach to assess the impact of various VMAP components as they are described in the *How VMAP Works* section (see page 6). The use of a mixed-methods evaluation approach allows for a more holistic and culturally responsive interpretation of VMAP implementation findings, both from a contextual and outcomes perspective, as well as additional insight into program effectiveness regarding accessibility and use of services.

The VMAP data and evaluation team used providers' National Provider Identifier (NPI) numbers, where applicable, to merge data sets with one another. This allowed for a more detailed and targeted analysis to be conducted, particularly as it relates to understanding provider and patient differences in VMAP service usage and access. The analyses conducted in this report offer insight as to the strength of correlation between groups, such as patient or provider population characteristics (e.g., sex, insurance status, etc.) and outcomes related to VMAP services. It should be noted that causal relationships between variables cannot be assumed when interpreting results.



Data Collection Instruments

Regional Hub Services

Regional hub services help PCPs better serve their patients by offering expert guidance on how to manage pediatric mental health. PCPs access VMAP's regional hub services by calling the VMAP line where they can consult with a CAP or LMHP, or receive care navigation services.

This report includes data collected through the VMAP line beginning when it opened in August 2019 through December 2021. For the purpose of conducting a longitudinal comparison study for this report and future reports based on calendar year, Year 1 includes all calls taking place between August 2019 and July 2020 and Year 2 includes all calls taking place between August 2020 and December 2021.

Post-VMAP Line Survey

Providers who utilize VMAP's regional hub services via the VMAP line are asked to share their feedback and experience through an anonymous Post-VMAP Line Survey.

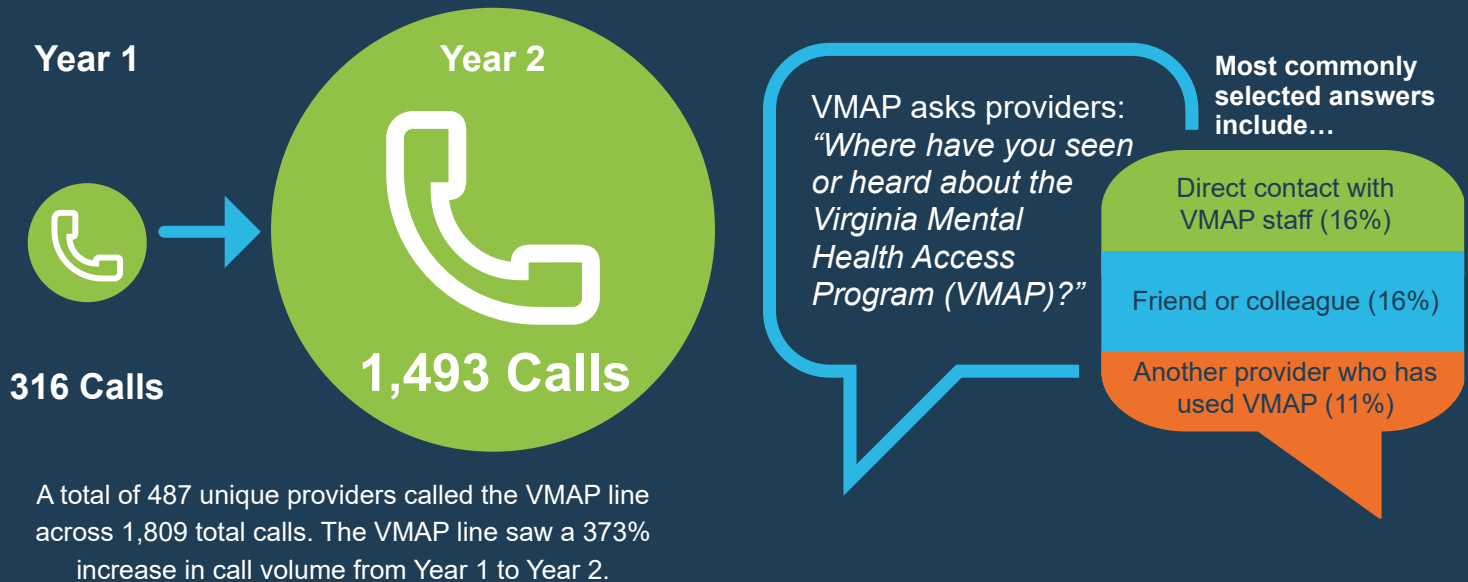
Provider Education

The VMAP data and evaluation team collaborates with the VMAP education team to collect data across three separate trainings (i.e., VMAP REACH PPP, VMAP Project ECHO, and QI Initiatives) using a total of 10 instruments. The three trainings administer a pre- and post-assessment at the beginning and end of each session to measure participants' change in perception, understanding, and confidence addressing several different types of mental illnesses and disorders.

Practice & Provider Registration Form

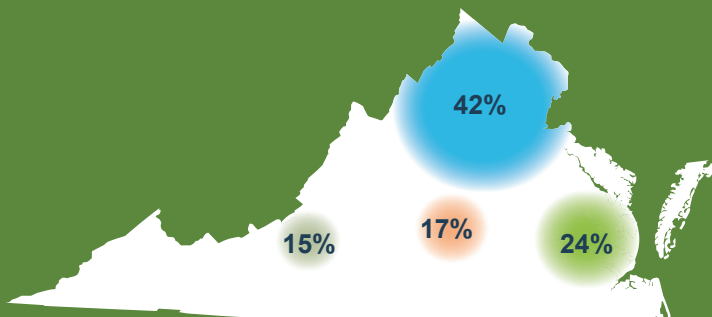
The Provider and Practice Registration Forms are used by the VMAP data and evaluation team to understand the contextual background of the types of providers and practices who register with VMAP.

REGIONAL HUB SERVICES



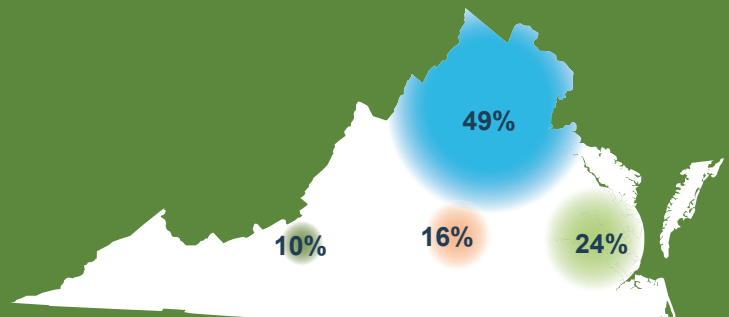
OVERVIEW OF PROVIDERS SERVED

Registered Providers



A total of **664 providers** across Virginia have registered for VMAP. Of all registered providers, 42% are located in the Northern region, 24% are located in the Eastern region, 17% are located in the Central region, and 15% are located in the Western region.

VMAP Line Utilization



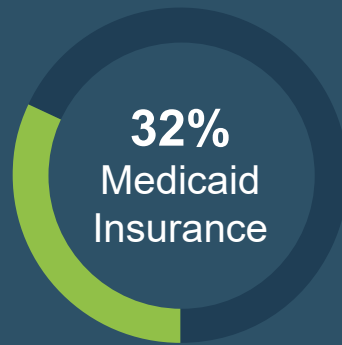
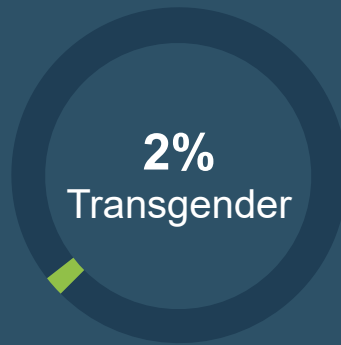
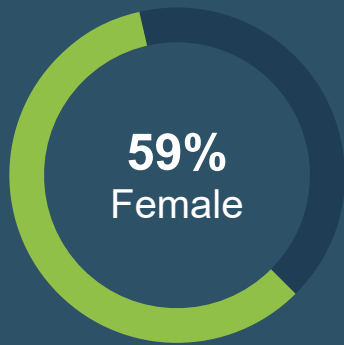
Of the 664 registered providers, **487 unique providers have used the VMAP line**. Of these, 49% are located in the Northern region, 24% are located in the Eastern region, 16% are located in the Central region, and 10% are located in the Western region.

Of the 487 unique providers who have used the VMAP line...

75% are pediatricians

17% are nurse practitioners

OVERVIEW OF PATIENTS SERVED



MEDICAID

Eastern Region

45%
of patients

Western Region

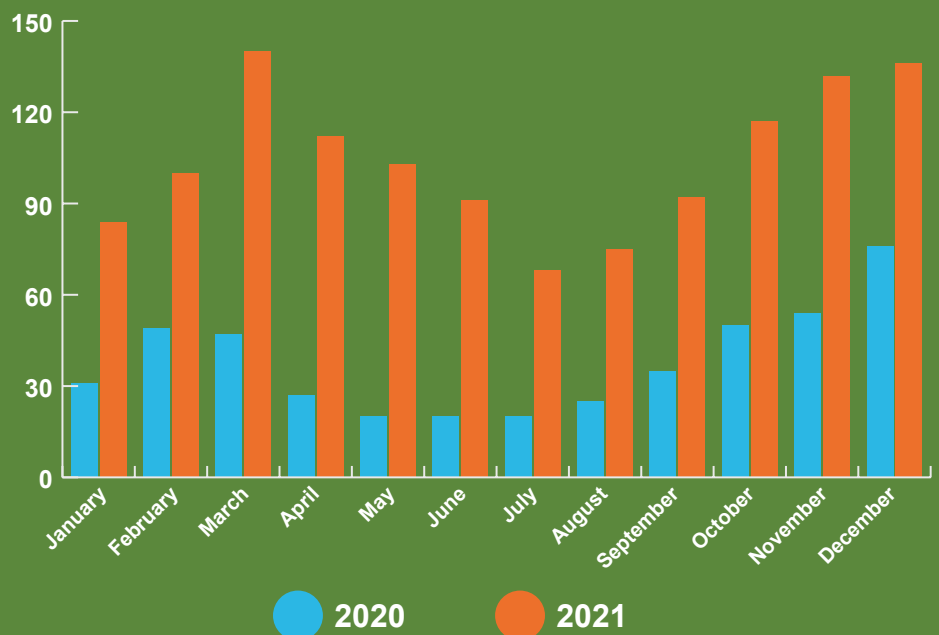
36%
of patients

Northern Region

23%
of patients

Of the 487 unique providers who used the VMAP line, **55% of those providers** called at least twice.

VMAP Line MONTHLY CALLS 2020-2021



Of the **221** providers who only called the VMAP line once, **30%** took place at the end of the data collection cycle for this report (September - December 2021).

PROVIDER CONCERNS FOR PATIENTS



Nearly one-third (30%) of all calls in which a provider received a CAP or LMHP consultation reported a general **safety concern** for their patient



47%

of all calls in which the patient was **transgender** saw a provider indicate a general safety concern



30%

of all calls in which the patient was **cisgender** saw a provider indicate a general safety concern

Specific concerns providers had for their patients

Inattention



Hyperactivity



Depression/Low Mood



Suicidal Ideation



41%

Transgender Patients



22%

Cisgender Patients



25%

Female Patients



16%

Male Patients

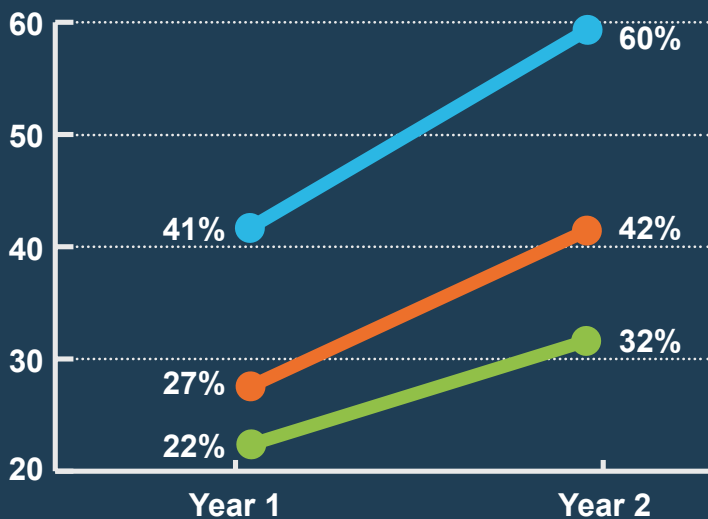
The **most common reasons** for providers to call the VMAP line out of a possible **1,588 calls**

84% Medication Consultation

15% Diagnostic Consultation

14% Therapy/Behavioral Consultation

Of the **1,588 total calls** where a provider received a CAP or LMHP consultation, the following **screening tools** were used:

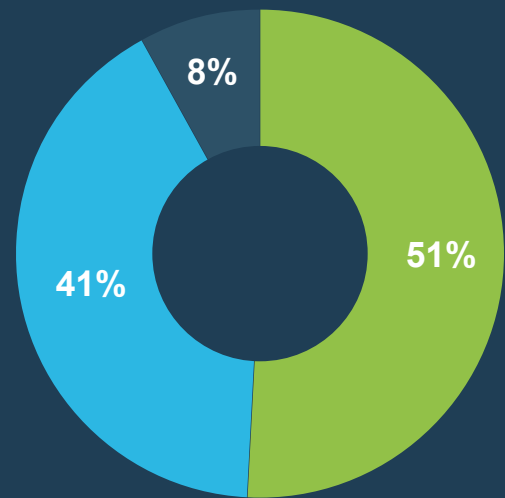


Any Screening Tool

Anxiety: SCARED, GAD-7

Depression: PHQ-2, PHQ-9, SMFQ, BDI, CDI

Of all calls where care navigation was requested for patients:



- Patients whose primary insurance was **private**
- Patients whose primary insurance was **Medicaid**
- Patients whose primary insurance was **unknown or were uninsured**

Provider Satisfaction

95% of the providers who received a CAP consultation found it to be either *very helpful* or *extremely helpful*

100% of providers believed the VMAP consultation to be *above average* or *excellent quality*

100% of providers believed the VMAP consultation *increased* or *greatly increased* their ability to manage their patient's mental health concern

97% of the providers were either *very likely* or *extremely likely* to use the VMAP line again

Out of 41 completed provider satisfaction surveys since August 2021

EDUCATION & TRAININGS

VMAP REACH PPP Training Outcomes

PARTICIPANT SELF-ASSESSMENT

Scale used by respondents includes the following:

1–Not at all | 2–Small amount | 3–Moderate amount | 4–Great deal

KEY: Pre-training score | Post-training score

Knowledge and Comfort in Managing Mental Health Disorders and Symptoms

Knowledge in Assessing and/or Diagnosing



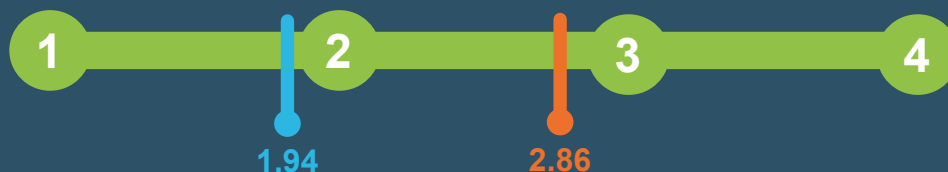
Knowledge in Treating



Comfort Level in Assessing and/or Diagnosing



Comfort Level in Treating



Each of the four measures above represent an aggregate of nine specific mental health disorders and symptoms, including: 1) ADHD, 2) Anxiety Disorders, 3) Major Depressive Disorder, 4) Bipolar Disorder, 5) Conduct Disorder, 6) Autism and Autistic Spectrum Disorders, 7) Suicide Risk, 8) Aggression, and 9) Comorbid Psychiatric Disorders.



331
participants



144
participants



98
participants

VMAP PROJECT ECHO Training Outcomes

PARTICIPANT SELF-ASSESSMENT

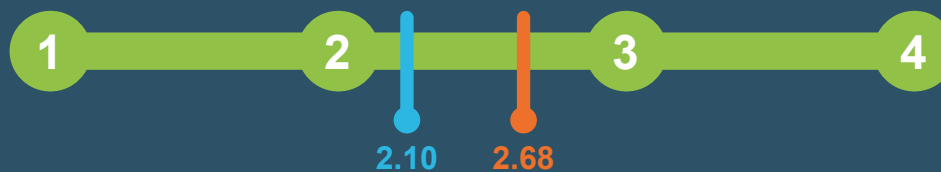
Scale used by respondents includes the following:

0–Not at all | 1–Slightly confident | 2–Somewhat confident | 3–Fairly confident
4–Completely confident

KEY: Pre-training score | Post-training score

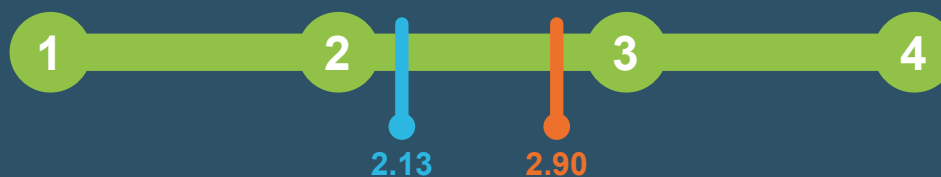
There was an increase in provider self-ratings across all 12 clinical tasks regarding their capability in assessing and treating pediatric mental health conditions.

Overall mean confidence scores pre- and post-training:

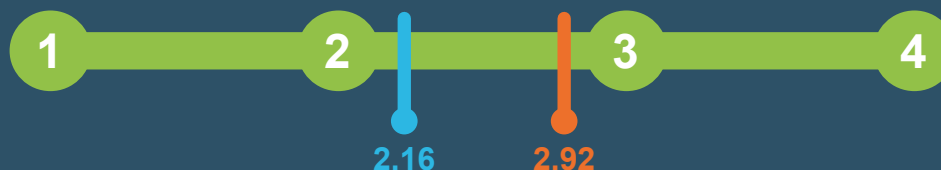


The most significant changes across the 12 clinical tasks regarding provider confidence include:

I am confident in my capabilities to treat and monitor child/adolescent anxiety disorders

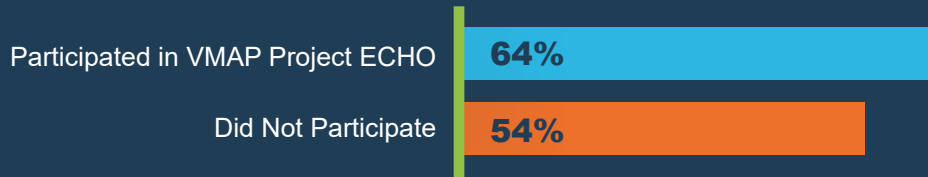


I am confident in my capabilities to treat for child/adolescent depression



When VMAP Project ECHO participants called the VMAP line, the following use of screening tools was reported:

ANY Screening Tool Used



Screening Tool Use for Depression



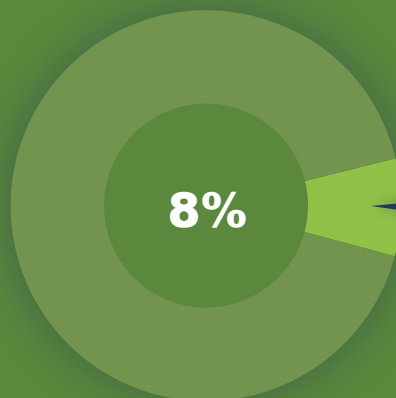
Screening Tool Use for Anxiety



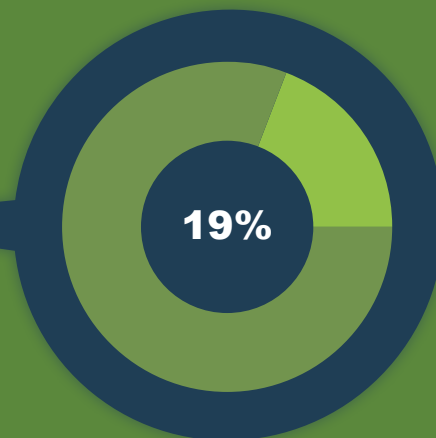
Out of 1,588 calls where a provider received a CAP or LMHP consultation

19% of all VMAP line calls were initiated by a provider who participated in VMAP Project ECHO.

Total Providers



Total Calls



VMAP Project ECHO participants make up 8% (n=37) of the 487 total unique providers who have used the VMAP line.

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Virginia Chapter

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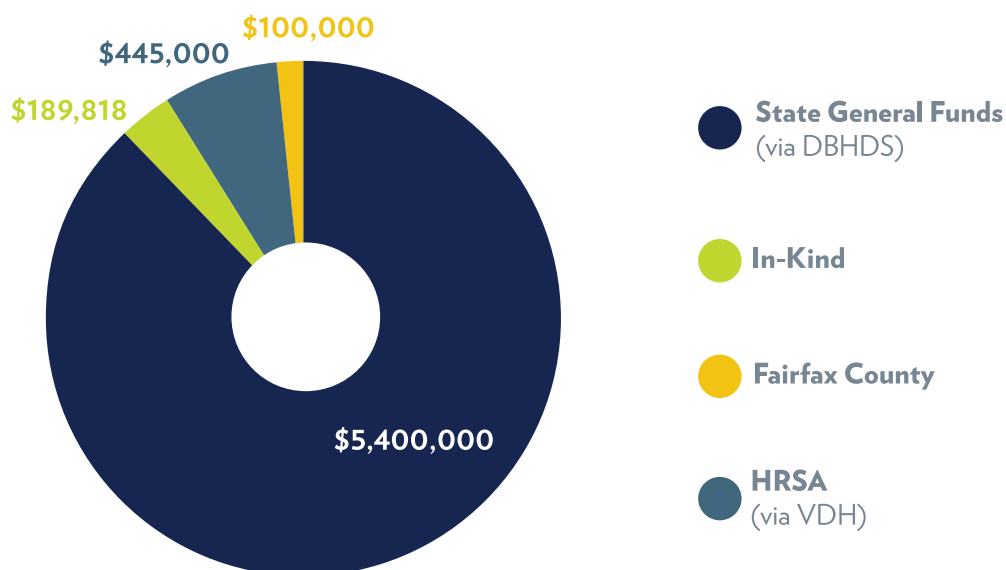
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Ally Singer Wright
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MSVF



Bethany Geldmaker
HRSA Program Director, VMAP
VDH



The Virginia Mental Health Access Program (VMAP) is a statewide initiative that helps health care providers take better care of children and adolescents with mental health conditions through provider education and increasing access to child psychiatrists, psychologists, social workers, and care navigators.