• RECORDING OF SESSION TO BEGIN
Agenda

• Introductions
• Objectives
• Didactic Presentation (~20-30 min)
• Case presentation
  • Clarifying questions
  • Participants – then faculty panel
• Discussion
• Recommendations
• Summary
• Closing Announcements
  • Submission of new cases
  • Completion of evaluations
Series Objectives

Learning objectives for this ECHO series include the ability to:

- Explain clinical knowledge about presentation of perinatal mental health complications
- Discuss treatment and management approaches
- Apply appropriate diagnostic and treatment strategies for the perinatal population, with an emphasis on diversity, equity, and inclusion
- Describe statewide resources that can assist patients who may experience perinatal mood and anxiety
CME Disclosures

University of Vermont (UVM) Office of Continuing Medical and Interprofessional Education (CMIE) is approved as a provider of Continuing Medical Education (CME) by the ACCME. UVM designates this internet live activity for a maximum of 1 AMA PRA Category 1 Credits.

UVM CMIE is accredited by the American Nurses Credentialing Center (ANCC) to provide CE for the healthcare team. This program has been reviewed and is acceptable for up to 1 Nursing Contact Hours.

As a Jointly Accredited Organization, The Robert Larner College of Medicine at the University of Vermont is approved to offer social work continuing education by the Association of Social Work Boards (ASWB) Approved Continuing Education (ACE) program. Organizations, not individual courses, are approved under this program. State and provincial regulatory boards have the final authority to determine whether an individual course may be accepted for continuing education credit. The University of Vermont maintains responsibility for this course. Social workers completing this course receive 1 continuing education credits.

This activity was planned by and for the healthcare team, and learners will receive 1 Interprofessional Continuing Education (IPCE) credit for learning and change.

Participants should claim only the credit commensurate with the extent of their participation in the activity.
CME Disclosures

**Interest Disclosures:** As an organization accredited by the ACCME to sponsor continuing medical education activities, UVMCMIE is required to disclose any real or apparent conflicts of interest (COI) that any speakers may have related to the content of their presentations.

**Meeting Disclaimer:** Regarding materials and information received during this educational event, the views, statements, and recommendations expressed during this activity represent those of the authors and speakers and do not necessarily represent the views of the University of Vermont.
Resource & Referrals Panel

Amy Wenger, RN-IBCLC, Franklin County Home Health Agency. St. Albans, VT. amy.wenger@fchha.org

Elizabeth Gilman, Help Me Grow VT. Essex, VT. Elizabeth@unitedwaysvt.org

Carol Lang-Godin, BA, Lamoille Family Center. Morrisville, VT. clang-godin@lamoillefamilycenter.org

Maria Rossi, CLC, CLD, BS, Washington County Mental Health Services. Barre, VT. Maria.Rossi@wcmhs.org

[No conflicts to disclose.]
Resource & Referrals Panel

Session Objectives:

• Understand the existing perinatal mental health system of care across the state of Vermont

• Increase confidence in how to refer patients for perinatal mental health services and support
Maternal Child Health-Home Health Nurse Visiting is available in **EVERY** county in Vermont
Maternal-Child Home Health Visiting Programming

• Medically ordered nursing visits
  • MD, PA, NP, send a medical order or referral to the home health agency in the county where the patient lives

• Lactation Consultation
  • Any agency or community partner, including the client, can send a referral for lactation consultation or call the agency for more assistance. Home Health has IBCLCs and CLCs

• Pediatric Palliative and High-Tech Program
  • Pediatrician must send a referral to the PPCP or High-Tech program.

• Responsive Nurse Home Visiting
  • ANY agency can send a referral to the Home Health Agency or CIS agency.
  • Use the CIS referral form or call the Home Health Agency

• Sustained Nurse Home Visiting
  • ANY agency can send a referral prenatally through the first 6 weeks postpartum.
  • Use the CIS referral form send to the HHA or CIS agency, or call the Home Health Agency

https://cispartners.vermont.gov/sites/dcf/files/CDD/CIS/CIS_Referral_Form.doc
Universal MCH Home Health Referrals for Patients with Perinatal SUD

- OB/Midwife
- Primary Care
- COGS MFM
- Pediatrics
- Community MAT prescribers
- Hospitals

Home Health Agency
- Maternal Child Health Nursing

Community Resources
- CARE
- COORDINATION

- DCF
- WIC
- Housing
- Restorative Justice
- Mental Health

Children's Integrated Services
- Early Intervention
- Family Support/PAT
- Early child/family mental health
# Vermont Home Health Agencies

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<tr>
<th>Agency Name</th>
<th>Address</th>
<th>Phone Number</th>
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<tr>
<td>Franklin County Home Health Agency</td>
<td>3 Home Health Circle #1, St Albans City, VT 05478</td>
<td>(802)527-7531</td>
</tr>
<tr>
<td>Lamoille County Home Health &amp; Hospice</td>
<td>54 Farr Ave, Morristown, VT 05661</td>
<td>(802)888-4651</td>
</tr>
<tr>
<td>Caledonia Home Health &amp; Hospice</td>
<td>161 Sherman Dr, St Johnsbury, VT 05819</td>
<td>(802)748-8116</td>
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<tr>
<td>UVM Health Network Home Health &amp; Hospice</td>
<td>1110 Prim Rd, Colchester, VT 05446</td>
<td>(802)658-1900</td>
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<tr>
<td>Central VT Home Health &amp; Hospice</td>
<td>600 Granger Rd, Barre, VT 05641</td>
<td>(802)223-1878</td>
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<tr>
<td>VNA &amp; Hospice of the South West Region</td>
<td>7 Albert Cree Dr, Rutland, VT 05701</td>
<td>(802)775-0568</td>
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<tr>
<td>VNA Visiting Nurses and Hospice of VT &amp; NH</td>
<td>88 Prospect St, White River Junction, VT 05001</td>
<td>(888)300-8853</td>
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Children's Integrated Services (CIS)

Early Intervention

Specialized Child Care

Service Coordination

Early Childhood and Family Mental Health

Strong Families VT Home Visiting
CIS IS PREVENTION: SERVING THE MOST VULNERABLE

High-impact Populations:

- Children with or at risk of disability or developmental delays
- Pregnant and new parents in need of additional parenting and well-being supports
- Families impacted by poverty, opioid use, housing instability, domestic violence, etc.
- Children who have experienced or are at risk for abuse and maltreatment

Upstream Services:

- Use a multi-generational approach to improving child and family outcomes
- Aim to decrease incidence and mitigate impacts of trauma and Adverse Childhood Experiences (ACEs) in young children
- Decrease later system involvement and more intensive service needs
- Utilize evidence-based practices with demonstrated outcomes
CIS Populations Served

Primary Population: Prenatal to 6 years

82% Served are Medicaid Recipients

~5400 Referrals Annually
~1500 Served Monthly

~50% Receive Early Intervention Services
INTEGRATED MULTI-DISCIPLINARY TEAMING AT EVERY LEVEL

CIS State Team: Staff in Waterbury provide program oversight and support

Fiscal Agent Contractor: A single agency in each region holds the CIS bundled contract

Regional CIS Admin Team: A coalition of providers and partners governs the regional CIS system and ensures service delivery

Local CIS Coordinators: An individual in each region coordinates partners, reporting, etc.

Regional Intake & Referral Meetings: Weekly meetings triage referrals and collaborate to serve children and families
**Population**
Early Intervention (EI) services are provided to children with or at risk of developmental delays or disabilities

**Services**
Services are wide-ranging, with examples including developmental education and occupational, physical, and speech therapies

**Authority**
EI is an entitlement under the federal IDEA Part C for all eligible children 0-3
State must ensure children receive necessary services, regardless of insurance status

**Funding**
Vermont receives an annual Part C grant for $2.3 million
State acts as payor of last resort, reimbursing what is not covered by other insurance (copays, etc.)
Services paid through monthly case rate and fee-for-service
SPECIALIZED CHILD CARE

SCC Coordinators assist families in accessing and maintaining childcare placements with the qualifications required to meet their specialized needs.

Grants to transportation providers allow eligible families to safely and reliably access specialized child care.

SAGs provide childcare programs with funding for supports needed to safely maintain placements, such as assistive devices or individual aides.

Care Coordination

Transportation

Special Accommodation Grants

The University of Vermont
LARNER COLLEGE OF MEDICINE
OFFICE OF PRIMARY CARE & AHEC PROGRAM
Registered Nurses or Family Support workers deliver long-term, structured, evidence-based home visiting programs. The programs improve maternal and child health and family economic self-sufficiency, promote optimal child development, prevent child abuse and neglect, and coordinates referrals to community resources.

Maternal and Child Health nurses and/or Family Support workers provide regular home visits in response to time-limited needs. These visits support and strengthen families’ health, wellbeing, parenting skills, social connections and ability to address stressors.
EARLY CHILDHOOD & FAMILY MENTAL HEALTH (ECFMH)

Treatment Services

- Address an event or detect social, emotional, behavioral and/or developmental problems
- Provide preventative and early intervention supportive services to mitigate these problems
- Expand young children’s access to mental health services

Consultation and Education Services

- Improve the overall capacity of caregivers to support the healthy social, emotional and behavioral development of young children.
- May include support for childcare staff and other service providers to enhance understanding and skill in addressing factors within their programs to support children’s healthy social, emotional and behavioral health and development
Children’s Integrated Services

Family Center of Washington County
383 Sherwood Drive, Montpelier, VT 05602
(802) 262-3292 x121

Sunrise Family Resource Center
244 Union Street, Bennington, VT 05201
(802) 442-6934

Winston Prouty Center for Child and Family Development
209 Austine Drive, Brattleboro, VT 05301
(802) 257-7852 x314

Champlain Valley Office of Economic Opportunity
19 Roosevelt Highway, Suite 305, Colchester, VT 05446
(802) 860-4426

Addison County Parent Child Center
PO Box 646, Middlebury, VT 05753
(802) 388-3171

Lamoille Family Center
480 Cadys Falls Road, Morrisville, VT 05661
(802) 888-5229 x141

Rutland Area Visiting Nurse Association
PO Box 787, 7 Albert Cree Drive, Rutland, VT 05702-0787
(802) 770-1621

The Family Center of Northwestern Counseling & Support Services
130 Fisher Pond Road, St. Albans, VT 05478
(802) 782-6768

Northeast Kingdom Community Action
115 Lincoln St. St. Johnsbury, VT 05819
(855) 883-5224

Springfield Area Parent Child Center
6 Main Street, North Springfield, VT 05150
(802) 886-5242

The Family Place - Hartford & WRJ Area
319 US Route 5 South, Norwich, VT 05055
(802) 649-3268

Orange County Parent Child Center - White River/Orange County Area
693 VT RT 110, Tunbridge, VT 05077
(802) 685-2264

Northeast Kingdom Community Action
371 Main Street, Newport, VT 05855
(855) 663-5224
Designated Mental Health Agencies

- Designated Agencies (DAs) in each VT county have clinicians trained to provide perinatal mental health support to parents, children, & families.
- Many agencies have specialized programs such as support groups for coping with pregnancy or adjusting to life with a new baby.
- A total of 7 DA’s currently engaged with STAMPP to pilot innovative projects in their communities to support PMH.

- **Divisions serving Perinatal MH at DA’s:**
  - Early Childhood & Family Mental Health
  - Outpatient Services
    - Adult
    - Children & Family
Examples of current DA Pilot Projects
[Regions have different programs & resources available, to support PMH unique to their communities]

- Offering screening, education, in-home MH support, office-based or telehealth therapy, birth & postpartum doula support
- Perinatal support groups: Ex: Mothers & Babies, It Takes a Village, Circle of Security Support, Meeting Other Moms
- Staff have specialized training- ex: EMDR for maternal MH, Perinatal Trauma, Perinatal Bereavement & Loss
- Serve as a consultant on PMADs to other agency depts & community partners
- Coalition-building & convening of regional advisory committee
- Building peer support programming
- Organizing Climb Out of Darkness (PMADs awareness raising events)
| **Clara Martin Center**  
http://www.claramartin.org/  
11 Main Street, Box G  
Randolph, VT 05060  
(802) 728-4466  
Bradford Main Site  
P.O. Box 278 (1483 Lower Plain)  
Bradford, VT 05033  
802-222-4477 | **United Counseling Services of Bennington County**  
http://www.ucsvt.org/  
Bennington UCS  
1 Ledge Hill Drive  
PO Box 588  
Bennington, VT 05201  
(802) 442-5491  
Northshire UCS  
5312 Main Street  
Manchester, VT 05254 |
|---|---|
| **Counseling Service of Addison County**  
http://www.csac-vt.org/  
89 Main Street  
Middlebury, VT 05753  
(802) 388-6751 | **Lamoille County Mental Health**  
www.lamoille.org  
72 Harrel Street  
Morrisville, VT 05661  
(802) 888-5026 |
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<td>(802) 488-6000</td>
<td>(802) 524-6554</td>
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<td>107 Fisher Pond Road</td>
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<td>300 Flynn Avenue</td>
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<tr>
<td>885 South Barre Road</td>
<td>1 Hospital Court, Suite 410</td>
</tr>
<tr>
<td>South Barre, VT 05670</td>
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<td>(802) 479-4083</td>
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Realizing the Promise of All Vermont’s Children

April 2022
Help Me Grow Child Development Specialists are a Resource to You and the Families You Serve

**Child Development Specialists can:**

- **Answer** parent and caregivers’ questions about their children's development and behavior
- **Connect** families to developmental resources and services in their communities — including specialized services like Children's Integrated Services
- **Provide** families with tools to track developmental milestones and provide developmental screening using the ASQ-3 and ASQ:SE
- **Offer** care coordination among multiple service delivery systems
- **Maintain** a comprehensive, up-to-date resource database to use with families and providers to help them connect to local and state resources
- **Provide** interpretation services along with translated materials
Building a Comprehensive Grid of Services

• Helping families access to behavioral/mental health treatment and supports:
  • Perinatal mood and anxiety disorder and related substance use disorders
  • Trauma services
  • Child/family mental health
Making the best treatment match possible

Type of treatment:
• Individual therapists
• Support groups
• In-person
• Telehealth options

Other considerations:
• Type of Insurance
• Transportation
• Previous treatment experience
• History of trauma, SUD
Help Me Grow services, tools, and resources to support you and your families

Contact HMG VT

To speak with an HMG VT Child Developmental Specialist call 2-1-1 x6
or text HMGVT to 898211

Hours: 8 AM - 5 PM, Monday - Friday
After hours please leave a message and indicate the best time to call you

Email us at info@helpmegrowvt.org

To refer a child/family please fill out our online Referral Form
Refer a Family and HMG Follows Up with You

1. Family has a need or concern
2. PCP/med staff checks in with family about their needs and concerns
3. With family’s consent, provider makes referral to HMG
4. HMG developmental specialist connects with family and assesses area(s) of need
5. HMG supports family to connect to agreed upon resources
6. HMG follows up with referring provider
Thank You!
Let’s Stay in Touch.

Email:

Elizabeth@unitedwaysvt.org
info@helpmegrowvt.org
Support Delivered is an umbrella of supports and services available to pregnant & postpartum Vermonters encompassing an array of Vermont-based perinatal mental health resources including:

- mental health clinicians with training and/or specialized expertise in PMH
- virtual clinical support groups
- parenting support groups
- other offerings (both in-person and virtual)
Support Delivered Materials
SupportDeliveredVT.com

PMAD Conditions
Perinatal Depression – It’s common and treatable, and it includes feelings of sadness, guilt, lack of interest in the baby, changes in eating and sleeping habits, trouble concentrating, thoughts of hopelessness, and sometimes even thoughts of harming yourself or the baby.

Baby Blues – Up to 80% of new mothers/postpartum people experience negative feelings during the first few weeks after delivery, when hormones are adjusting. Symptoms usually resolve within 2-3 weeks without medical intervention.

Perinatal Anxiety – An individual with anxiety may experience extreme worry and fear, often over the health and safety of the baby. Some have panic attacks and might feel shortness of breath, irritability, chest pain, dizziness, a sense of losing control, and difficulty sleeping despite exhaustion.

Obsessive Compulsive Disorder – Individuals with OCD can have repetitive, upsetting, and unhelpful thoughts or mental images (cognitions), and sometimes they need to do certain things over and over (compulsions) to reduce the anxiety caused by those thoughts. These thoughts can be very scary and unusual.

Post-Traumatic Stress Disorder – PTSD is often caused by a traumatic or frightening childhood, and symptoms may include flashbacks of the trauma with feelings of anxiety and the need to avoid things related to that event.

Perinatal Bipolar Disorder – About 22% of pregnant and postpartum people diagnosed with postpartum depression are suffering from perinatal bipolar disorder. More than 70% of individuals with bipolar disorder prior to pregnancy will experience during pregnancy if psychotropic medication is stopped.

Postpartum Psychosis – Postpartum psychosis is rare (approx. 1-2 per 1000 births) and a very serious emergency requiring immediate medical help. Individuals experiencing psychosis sometimes see images and hear voices that others can’t, called hallucinations. They may believe things that aren’t reality-based and distrust those around them. They may also have periods of confusion or memory loss and seem manic. If you or someone you know may be experiencing postpartum psychosis, call a doctor or go to the nearest hospital emergency room.

Where to get help
If you are experiencing symptoms of PMADs, please talk with your healthcare provider.

Help Me Grow connects expecting and new families to mental health clinicians with specialized expertise in treating PMADs and other community services. Call 2-1-1 option 4, text 94575 to 898211, or email info@helpmegrowvt.org.

Postpartum Support International (PSI) Vermont has a warm line with local coordinators who provide support, information, and encouragement. Virtual support groups can be accessed at www.postpartumvt.net.

Designated Mental Health Agencies in each VT county have clinicians trained to provide perinatal mental health support to parents, children, and families. Many agencies have support groups for coping with pregnancy or adjusting to life with a new baby. Find more information at www.mentalhealth.vermont.gov.

For more information, visit SupportDeliveredVT.com

The Vermont Department of Health and the Vermont Department of Mental Health are collaborating on the Screening, Treatment, and Access to Maternal & Perinatal Partners (COMMIT), a 5-year cooperative agreement funded by HRSA to bring support services to expectant and new parents and families. The University of Vermont ECHO Program is working with the Vermont Department of Health to provide support, training, and education to mental health providers throughout Vermont.
Support Delivered Materials
SupportDeliveredVT.com

Mental Health Resources for Expecting + New Parents

- Perinatal mood and anxiety disorders (PMADs) are common and treatable.
- As many as 1 in 5 women are affected, making it the leading complication in pregnancy and the postpartum period.
- There is evidence that fathers, partners, and foster or adoptive parents are similarly at risk from the stress of welcoming a baby.
- Left untreated, PMADs can have profound and lasting impact on parents, children, and even entire families.
- Universal screening for PMADs by a trusted medical provider is a critical step in identifying individuals in need of treatment, especially when many may be reluctant to open up about their symptoms.

Assistance for Medical and Mental Health Providers:

- Perinatal Mood and Anxiety Psychiatric Consultation Service at UVMMMC—Perinatal psychiatry consultation and educational resources on PMADs are available for obstetric, primary care, pediatric, and psychiatric providers. Services include:
  - Provider Training and Education
  - Technical Assistance Implementing Screening
  - Guidance Around Prescribing Psychotropic Medications for the Perinatal Population

Medical providers seeking a FREE consultation or education should call (802) 847-4758.

Refer patients to Help Me Grow Vermont

Help Me Grow Vermont is a free service for perinatal parents and families with young children through age eight. Help Me Grow has child development specialists on staff that can provide information and referrals to local and statewide agencies, as well as offer care coordination among multiple service delivery systems.

Help Me Grow has recently expanded services to assist parents and families by providing access to additional support during the perinatal period. Pregnant or postpartum caregivers and families who need help connecting with trained perinatal mental health directors, parent support groups, and other perinatal support can contact Help Me Grow for this free assistance.

Call 211, option 6
Email Info@helplemegrowvt.org

Project ECHO
The University of Vermont
Larner College of Medicine
Office of Primary Care & AHEC Program

The Vermont Department of Health and the Vermont Department of Mental Health are collaborating on the ensuing, tailored, & Action for Mental Health Endowment (CARE) initiative; an interagency agreement funded by HRSA to help support perinatal mental health services in Vermont.
Support Delivered Materials
SupportDeliveredVT.com

Perinatal Psychiatric Consultation Service

- As many as 1 in 5 women suffer from symptoms of depression and/or anxiety during the perinatal period.
- Perinatal Mood and Anxiety Disorders (PMADs) are the most common complication associated with childbirth.
- Prescribing clinicians may be the first, and possibly the only, providers to work with Vermonters and families struggling with PMADs.
- Professional consultation and resources regarding PMADs are available for obstetrics & gynecology, primary care, pediatrics, psychiatric, and other community providers.

Services Include:

- Guidance around prescribing psychotropic medications to the perinatal population.
- Guidance on screening, assessment, diagnosis, and recommended treatment strategies.

Free consultations are available for medical providers. Call (802) 847-4758.

This is not an emergency service. The service does not provide direct treatment—only support for clinicians providing patient care.

This is a free service provided in collaboration with the Vermont Department of Health.

For additional information on PMADs and Vermont-specific resources visit SupportDeliveredVT.com.

Help Me Grow
Vermont connects expecting and new families to mental health clinicians with specialized expertise in treating perinatal mood and anxiety disorders (PMADs) and other community services.

- Call 211, option 6
- Text HMGVT to 898211
- Email info@helpmegrowvt.org

Providers working with pregnant and postpartum individuals and families experiencing PMADs can make a direct referral by calling or completing an online referral form at helpmegrowvt.org.

The Vermont Department of Health and the Vermont Department of Mental Health are collaborating on the Screening, Treatment, & Access for Women, & Perinatal Health (STAMPH) 5-year cooperative agreement funded by HRSA to help expand perinatal mental health services in Vermont.
Discussion and Q & A
The discussion and materials included in this conference are confidential and privileged pursuant to 26VSA Section 1441-1443. This material is intended for use in improving patient care. It is privileged and strictly confidential and is to be used only for the evaluation and improvement of patient care.
Case Presentation Format

Case presentation from a participant (a real-world case, from the field)
Then
Clarifying questions about the case from group to case presenter
Then
Ideas, suggestions, recommendations from participants
Then
Ideas, suggestions, recommendations from ECHO faculty team
Then
Additional discussion, if any (All)
Then
Summary of case discussion
(course co-directors: Katherine Mariani, MD, MPH and Jill Davis, MA)
• RECORDING TO BE STOPPED FOR CASE PRESENTATION
**Prep for Next Session**

Prior to each session, if you have specific questions for our faculty expert(s), please let us know and we will pass along ahead of time.

<table>
<thead>
<tr>
<th><strong>DATES</strong></th>
<th><strong>SESSION</strong></th>
<th><strong>DIDACTIC TOPICS (in addition to case review)</strong></th>
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<tbody>
<tr>
<td>Jan 11</td>
<td>TeleECHO Session 1</td>
<td>Depression &amp; Anxiety in the Prenatal Period (Sandy Wood, CNM, PMHNP)</td>
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<td>Feb 8</td>
<td>TeleECHO Session 2</td>
<td>Cultural Considerations in Perinatal Mental Health (Sayida Peprah, PsyD)</td>
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<tr>
<td>Mar 8</td>
<td>TeleECHO Session 3</td>
<td>Depression &amp; Anxiety in the Postpartum Period (Sandy Wood, CNM, PMHNP)</td>
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<tr>
<td>Apr 12</td>
<td>TeleECHO Session 4</td>
<td>Resources &amp; Referrals (Amy Wenger, RN, Elizabeth Gilman, Carol Lang-Godin, BA, and Maria Rossi, CLC, CLD, BS)</td>
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<td>May 10</td>
<td>TeleECHO Session 5</td>
<td>Bipolar Disorder in the Peripartum (Sarah Guth, MD)</td>
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<td>May 31</td>
<td>TeleECHO Session 6</td>
<td>Postpartum Psychosis (Sarah Guth, MD)</td>
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<td>June 14</td>
<td>TeleECHO Session 7</td>
<td>Birth Trauma/Perinatal Grief &amp; Loss (Fiona Griffin, LCMHC)</td>
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Conclusion

• Slides are posted at www.vtahec.org

• Volunteers to present cases (this is key to the Project ECHO model)
  • Please submit cases to Katherine.Mariani@uvmhealth.org

• Please complete evaluation survey after each session

• Once your completed evaluation is submitted, CE information will be emailed to you.

• Please contact us with any questions, concerns, or suggestions
  • Katherine.Mariani@uvmhealth.org
  • Elizabeth.Cote@uvm.edu