



VMAP
Virginia Mental Health
Access Program

Early Childhood Data Insights

VMAP Executive Summary

Designed in 2018, VMAP addresses the pediatric mental health crisis in Virginia through a multi-tiered and culturally responsive lens. **VMAP's model offers true system change**, supporting primary care providers (PCPs) who see patients 21 and under by **improving their ability to assess, treat, and manage their patients' mental health**, thereby **mitigating mental health workforce shortages**. As VMAP enters its fifth year, its statewide reach continues to grow. By the end of 2023, there were **1,354** PCPs registered for VMAP, which represents a **28% increase** in the last year!



THE VMAP LINE

The VMAP Line is staffed by nearly 50 team members across the state. Since it launched in 2019, it has:

Received
6,673
calls from PCPs

Served
5,592
Virginia pediatric patients

74% of families
were connected to local resources

Completed
4,081
mental health consultations and

4,113
care navigation requests¹

82% of PCPs
were able to continue managing their patient's concerns after a consultation

PROVIDER EDUCATION

Since 2019, VMAP has:

Executed
46
REACH, ECHO,
and QI trainings

Trained
1,335
PCP participants

Conducted
22
one-time webinars and trainings for providers

Seen
3,279
downloads of the VMAP Guidebook

79 providers
earned the VMAP Recognition Badge in 2023, demonstrating completion of one of VMAP's intensive education programs

In addition to these direct services, VMAP is estimated to reach **hundreds of thousands** of Virginia children through their PCPs. Pediatricians have an average patient panel of 1,500 patients. As a result, for every provider trained by VMAP, their entire patient panel benefits from **improved access to mental healthcare**.

EVALUATION AND IMPACT

VMAP conducts ongoing evaluations to measure and assess its impact on providers. Using data from the VMAP Line, pre- and post-assessment data from trainings, and provider surveys, VMAP has triangulated significant findings that demonstrate:

- 1 Increased utilization of all VMAP core services by providers across Virginia.
- 2 Year-over-year increased screening tool usage with significant increases in screening for depression and anxiety.
- 3 Notable differences in provider types using VMAP across regions, with sizable expansion to a wider variety of providers in the last two years.

For the full 2023 Impact Report and more information on VMAP, scan the QR code.



¹Please note more than one service (physician consultation, LMHP consultation, and care navigation) can be requested in a single call.

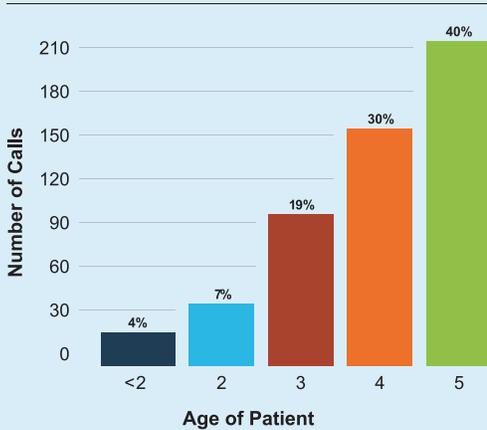
Data sources and limitations: This report was created using VMAP Line data, pre-and post-assessment data from training, and provider surveys. A noted limitation of this data is that it is collected via self-report, increasing the risk of bias. Another noted limitation is that VMAP Line data may over- or under-include certain diagnoses or concerns due to the varying nature of why providers utilize the line. Generalization of findings to the larger pediatric population should be used with caution.

Why focus on early childhood?

Through exploring the needs of pediatric patients across the state, VMAP **identified a severe gap** for Virginia’s youngest patients. Workforce shortages combined with an increase in demand has resulted in extensive wait lists for specialists who diagnose and manage early childhood mental, emotional, behavioral, and developmental health concerns. To address these issues, VMAP **successfully advocated** for increased state funding to provide the **training and support** PCPs need to **recognize these critical concerns** and **respond quickly**. This includes adding early childhood specialists to provide consultation on the VMAP Line, early childhood care navigation to help families identify and access community resources, and provider education trainings that focus on the needs of children under the age of six.



Early Childhood Age Distribution



VMAP Line Summary: Early Childhood Calls

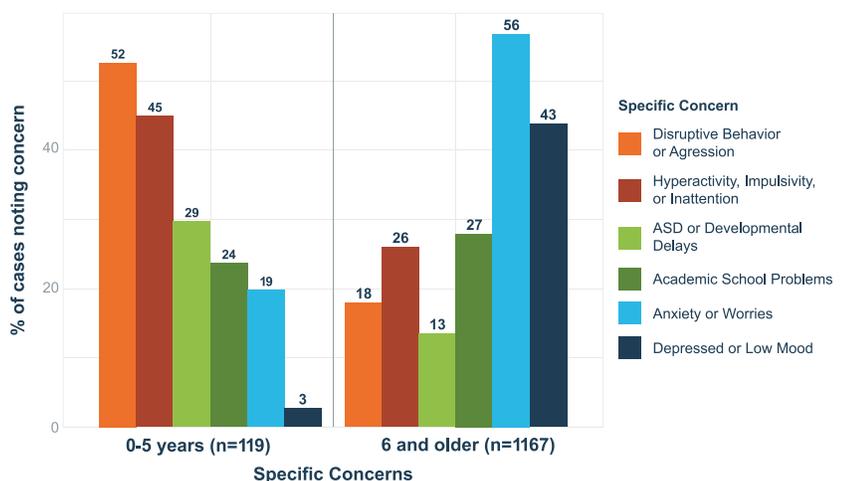
- ▶ Total calls for patients under 6 since inception (2019): 576
 - 2019-2022: 7.5% of calls
 - 2023: 10% of calls, a **33% increase in proportion of all calls**
- ▶ 326 (57%) included a consultation with a clinician and 416 (72%) included care navigation.

VMAP Line Consultation Top Concerns: A Comparison

There were differences in the top concerns for children under the age of six (0-5) compared to children six and older (6+).

It is notable that 1 in 5 consultation calls in 2023 for children under the age of 6 (23.5%) expressed concerns with school or daycare.

Top Concerns for Consults: A Comparison

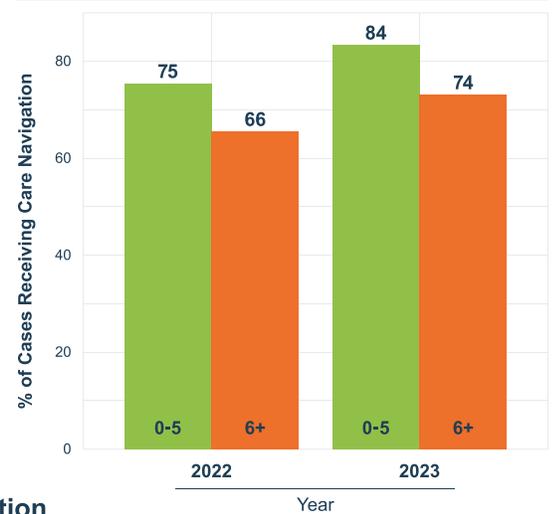


Care Navigation Needs: A Comparison

In 2022 and 2023, there were significantly more care navigation requests for the early childhood age group (0-5) than for 6+. This reflects the increased need for additional supports and community services for younger children.

Differences were noted between the top care navigation referral types for children under the age of six (0-5) compared to children six and older (6+). Referral categories that were more likely to show up for the early childhood age group included *Early Intervention or Developmental Services, ABA Therapy, Other Mental Health/Medical Outpatient Services, and Psychiatric Testing.*

Requests for Care Navigation by Age



Likelihood of referral types for the Early Childhood population



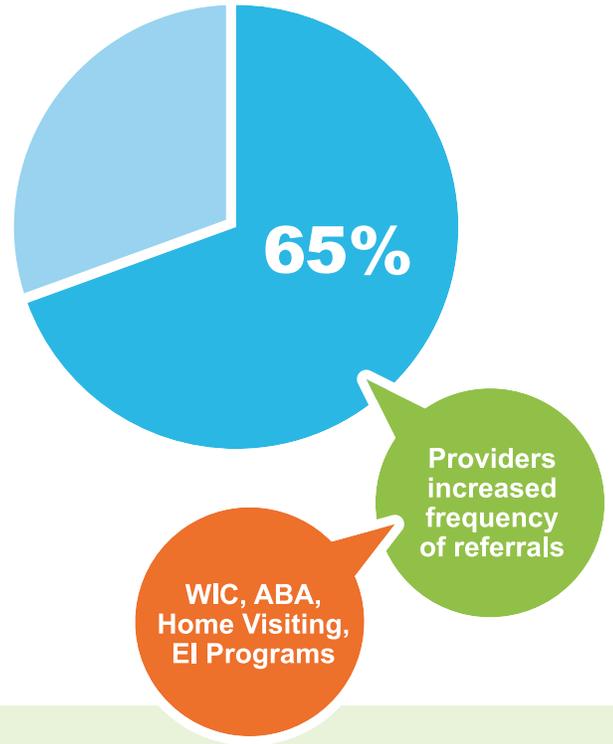
Early Childhood Education Insights

In 2023, VMAP offered **early childhood provider education opportunities**, including two new ECHO cohorts—*Birth to Five: A Deeper Dive* and *Systems of Care for Kids (SOCKs)*. Each ECHO offered early childhood specialized training through 11 one-hour virtual sessions led by multidisciplinary experts. VMAP also piloted a *Triple P (Positive Parenting Program)* training to help PCPs support parents in managing behavioral and emotional concerns in their children. This program included two days of intensive instruction, which was followed by peer coaching and supervision over six months. In 2023, VMAP trained 70 participants through these programs. Physicians made up 71% of all participants, and nurse practitioners made up 10%. A majority of participants in these programs reported the trainings supported **their ability to address early childhood concerns within their practice.**

See More

Notable Early Childhood Provider Education Outcomes

65% of *ECHO SOCKS* respondents reported that since their training, their practice had increased frequency in referral to a variety of infant and toddler-focused programs (e.g., home visiting, WIC, and early intervention).

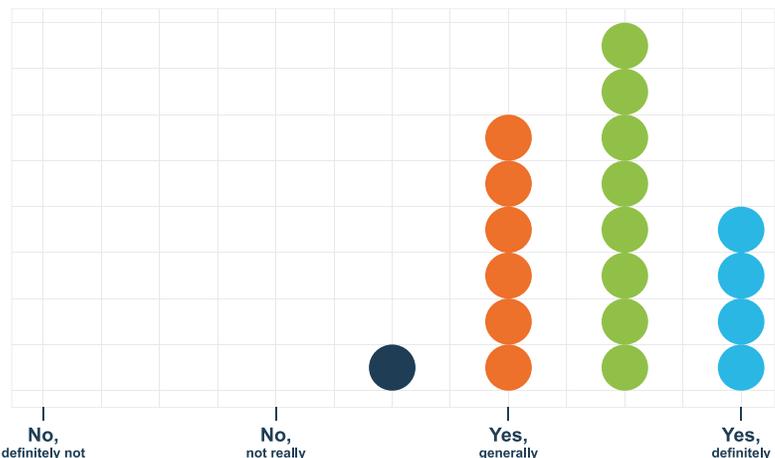


p-value=0.002, Wilcoxon signed rank test

ECHO Birth to Five respondents reported significantly increased confidence in their ability to manage a variety of early childhood issues as a result of their participation in the program (based on pre-post assessment scores).

In a post-assessment survey for *Triple P*, participants were asked if they felt adequately trained to conduct parent consultations about child behavior, with responses being selected from a 7-point scale. Scores overwhelmingly indicated strong provider confidence following training (average score = 5.79).

Do you feel adequately trained to conduct parent consultations about child behavior?



To learn more about our program, visit vmap.org