



Amy Johnson – Director of Government Affairs & Communications
Vermont Care Partners
Testimony – Senate Health and Welfare (S.109); January 23, 2024

Vermont's System of Care Designated and Specialized Service Agencies

NCSS: Northwestern Counseling & Support Services www.ncssinc.org

NKHS: Northeast Kingdom Human Services www.nkhs.org

GMSS: Green Mountain Support Services www.gmssi.org

LCMHS: Lamoille County Mental Health Services www.Lamoille.org

CCS: Champlain Community Services www.ccs-vt.org

HC: Howard Center www.howardcenter.org

NFI: Northeastern Family Institute, NFI Vermont, Inc. www.nfivermont.org

WCMHS: Washington County Mental Health Services www.wcmhs.org

CSAC: Counseling Service of Addison County www.csac-vt.org

CMC: Clara Martin Center www.claramartin.org

UVS: Upper Valley Services www.uvs-vt.org

LSI: Lincoln Street, Inc. www.lincolnstreetinc.org

RMHS: Rutland Mental Health Services / Community Care Network www.rmhsccn.org

HCRS: Health Care & Rehabilitation Services www.hcrs.org

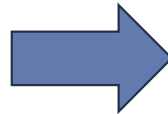
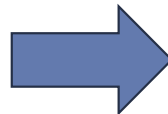
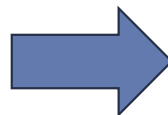
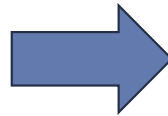
UCS: United Counseling Service of Bennington County www.ucsvt.org

FFSV: Families First in Southern Vermont www.familiesfirstvt.org



VCP Network Responsive to Community Needs

- Home visiting nurses identify high rates of families experiencing postpartum depression
- Call on the local DA to help with this community issue
- Program begins with one home visiting perinatal mental health clinician
- Agency expands program to push up-stream and intervene early
- Agency creates HEART to HEART (Abenaki peer expansion)



Supporting:

- Better birth outcomes
- Mitigating risk/impact of perinatal depression and related disorders
- Early relational health
- Parent/child attachment and bonding which supports child development
- Connection to basic needs
- Culturally congruent care
- All Vermonters including the most vulnerable

Universal Doula Supports for Franklin/Grand Isle

(Northwestern Counseling & Support
Services – Parent Child Center)

- **3 perinatal doulas**
- **Overnight doula – high risk families**
- **Perinatal MH clinicians**
- **Rounds at the local hospital**
- **SDOH supports**
- **Groups**
- **Perinatal grief/loss supports**
- **Abenaki peer to peer program**



Quick Outcomes FY23



126 families referred

101 families served

99% screened for postpartum depression (Edinburgh Postnatal Scale)

95% of families improved after being in the program (Edinburgh Postnatal Scale)

“I wish this program was accessible in all of Vermont.” – HEART participant

“I really appreciate this program and the help I was afforded. I’m so thankful it exists.” – HEART participant

Funding and Limitations

Funding

- Parent Child Center funding
- Integrating Family Services (clinicians only)
- STAMPP (professional development and supplies only)
- Health Equity Grant (VDH)

Barriers

- Most program components are non-billable creating a sustainability concern for the program
- Unable to add labor/delivery component of the program
- Unable to expand services

VCP Request

- Please support this vital service by limiting provisions that prevent doulas from providing needed preventative and early intervention care
- Please ensure that barriers are removed to allow the greatest access possible for these vital services (e.g., language access)
- Bill language that supports community-based providers in continuing to provide and sustain services for the most vulnerable populations (e.g., equitable reimbursement rates, reimbursement for labor/delivery support)



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