

OVERVIEW OF THE DEPARTMENT OF MENTAL HEALTH

Commissioner Emily Hawes

2.20.2026

The Department of Mental Health: Mission & Vision

The **Mission** of the Department of Mental Health is to promote mental health as a vital part of overall well-being by advancing prevention, early intervention, and recovery-focused care.

We partner with individuals, families, and communities to provide equitable, effective, and compassionate support that fosters resilience, empowers Vermonters to achieve their goals, and ensures they can live, work, learn, and thrive in their communities.

Our **Vision**: Mental health is a cornerstone of health in Vermont. Vermonters live in caring, inclusive communities that respond with compassion and respect to mental health needs, ensuring everyone can thrive and participate fully in their lives.



DMH Core Values



Compassion

- We approach all people with care, empathy, and respect. Compassion guides how we support Vermonters and each other—especially in times of vulnerability, crisis, or need.



Equity

We work to ensure everyone has what they need to thrive. This includes addressing systemic barriers and advancing inclusion across race, gender, sexual orientation, geography, ability, identity, religion, and lived experience.



Integrity

- We act with honesty, transparency, and consistency. We do what's right—even when it's hard—and follow through on our commitments with fairness and clarity.



Collaboration

- We believe we are stronger when we work together. We actively seek partnerships across systems with communities, organizations, and individuals to build solutions that reflect shared voices and inclusive leadership.



Accountability

- We take responsibility for our actions, services, and outcomes. Accountability reflects our duty to serve the public, support one another, and deliver high-quality, person-centered care.

What we do at the Department of Mental Health

- Responsible through statute for the mental health system of care for Vermonters.
- Composed of 326 staff positions (including 245 Facility staff and 81 Central Office staff).
- Handling a budget of \$339M that supports mental health services to over 25,000 Vermonters.
- Overseeing our 10 Designated Agencies and 2 Specialized Service Agencies.
- Running the Vermont Psychiatric Care Hospital (25 beds) and River Valley Therapeutic Residence (16 beds).
- Managing several contracts and grants to peer organizations, forensic psychiatrists, psychiatric consultation with primary care,, and Community Roundtable contract to conduct analyses of population-level data related to mental health.
- Partnering with hospitals, community providers, housing specialists, police departments, courts, and more!



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The Department of Mental Health ...shall centralize and more efficiently establish the general policy and execute the programs and services of the State concerning mental health, and integrate and coordinate those programs and services with the programs and services of other departments of the State, its political subdivisions, and private agencies, so as to provide a flexible comprehensive service to all citizens of the State in mental health and related problems. The Department shall ensure equal access to appropriate mental health care in a manner equivalent to other aspects of health care as part of an integrated, holistic system of care.

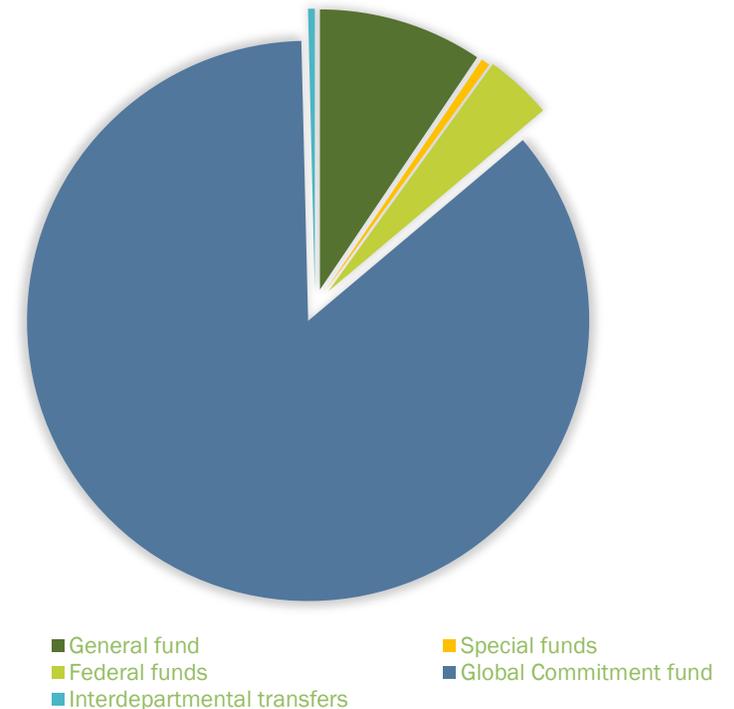
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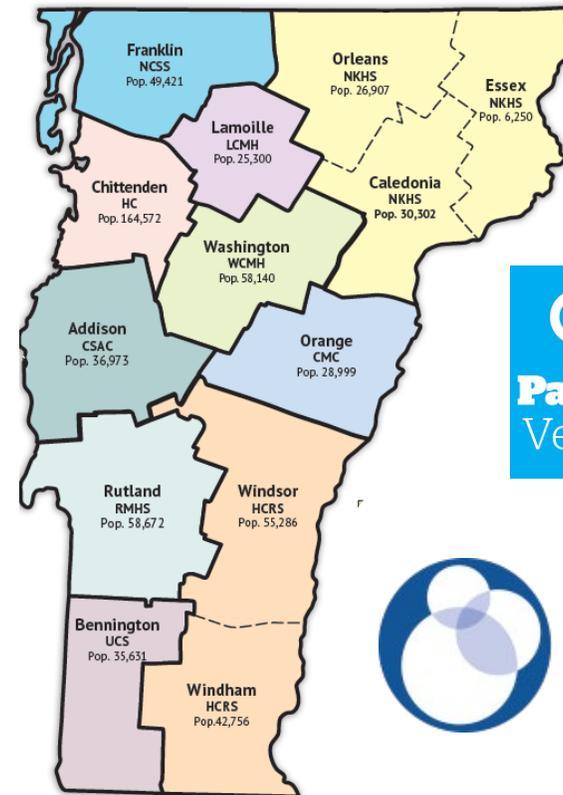
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MENTAL HEALTH SYSTEM OF CARE

Key to Provider Symbols

- BLUE: ADULTS SYSTEM OF CARE
- GREEN: CHILD, YOUTH & FAMILY SYSTEM OF CARE
- ORANGE: SERVICES IN BOTH YOUTH & ADULTS

- Peer Services
- Department of Mental Health
- Designated and Specialized Services Agencies
- Private Providers

Inpatient Hospitalization

- Children & Adolescent
- General Inpatient (Adult)
- Level One Inpatient (Adult)

Secure Residential

- River Valley Therapeutic Residence (RVTR)

Intensive Residential & Treatment Programs

- Youth Residential (PNMI)
- Intensive Recovery Residential
- Peer-run Residential
- Youth Psychiatric Residential Treatment Facility (PRTF)

Crisis Supports & Response

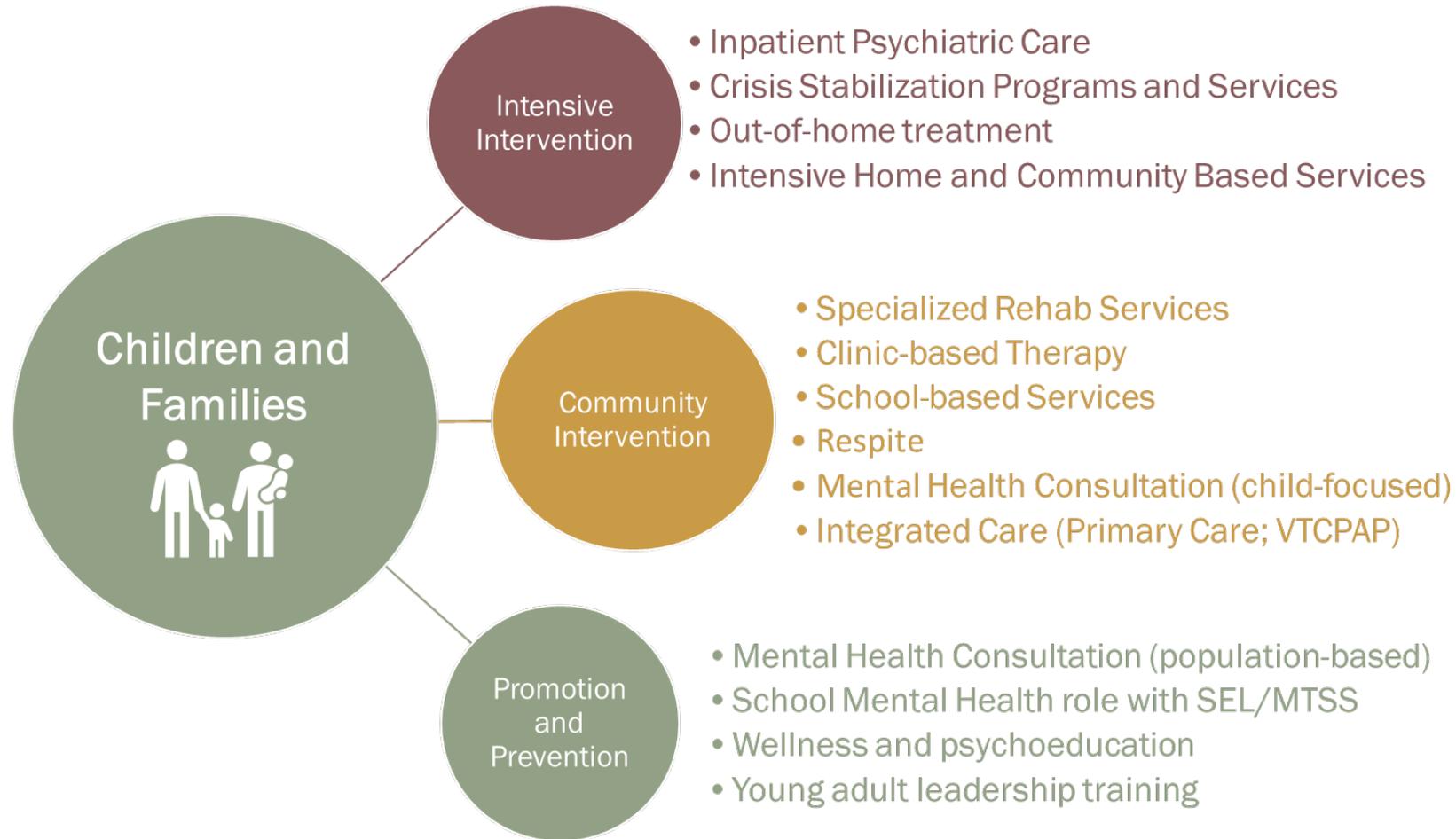
- Children's Crisis Stabilization Program
- Youth Hospital Diversion Program
- Adult Integrated Crisis Beds
- Mental Health Urgent Cares (Adult/Youth)
- 988 Crisis Lifeline Centers
- Mobile Crisis Response
- Crisis Assessment, Support & Referral

Community Mental Health

- Micro-residential (HCBS)
- Youth Group Homes (PNMI)
- Group Residential Homes
- Shelter & Care Vouchers
- DMH Housing Vouchers
- Individual, family, and group therapy
 - Clinical assessment
 - Medical consultation and medication
 - Service planning and coordination
 - Community supports & employment services
 - Schools/PCP/Early care & learning ctrs (youth only)
 - Peer programming (adults only)
 - Prevention work (youth only)
 - Continuing Education & Advocacy

Updated October 2025

Children's Mental Health System of Care



WORKFORCE

- VFN/ VFFCMH**
Advocacy, Youth and Family Voice
- DVHA**
*Inpatient, Crisis Beds
Other Medicaid providers*
- UVM**
*Child Psychiatry,
VCHIP*
- DMH**
10 DAs, 1 SSA, 1 DH
- DAIL**
DS, HireAbility
- DOC**
Services for YIT
- VDH**
DSU, EPI, FCH
- DCF**
Family Services, CDD
- AOE**
LEAs

Community Mental Health Programs & Services for Children Youth & Families

Children, Youth & Families



- Serves children, youth and families who are experiencing emotional or psychological distress or are having problems adjusting to changing life situations.
- Child-centered, family-focused, culturally competent, strength-based, individualized, community-based, and collaborative between and among families, agencies and community.
- All services must adhere to Early Periodic Screening Diagnosis and Treatment (EPSDT) requirements for Medicaid-enrolled children and youth.

Emergency Services



- Time-limited, intensive supports, available 24/7
- For individuals and families who are currently experiencing, or may be expected to experience, a psychological, behavioral, or emotional crisis.
- Services may also be provided to the individual's or family's immediate support system.

Success Beyond Six (SB6) Medicaid Program



Medicaid funding mechanism for school mental health services provided through Designated Agencies in partnership with a Local Education Agency (LEA)



Local contract between a Supervisory Union/ School District (SU/SD) or school and a Designated Agency (DA). SU/SD or school provides local match to draw down Medicaid federal share through DMH/DA authority



DA provides clinical treatment & behavioral interventions in public schools



Therapeutic independent schools run by DAs

Project AWARE - Advancing Wellness and Resilience in Education



\$1.8M per year, for up to 5 years (09/30/2023 to 09/29/2028), award from the Substance Abuse and Mental Health Services Administration (SAMHSA)



DMH is the recipient, in partnership with the Agency of Education (AOE)



Project is focused in 3 Local Education Agencies (LEAs) and partnership with their local Designated mental health Agency, with broader statewide impacts where possible

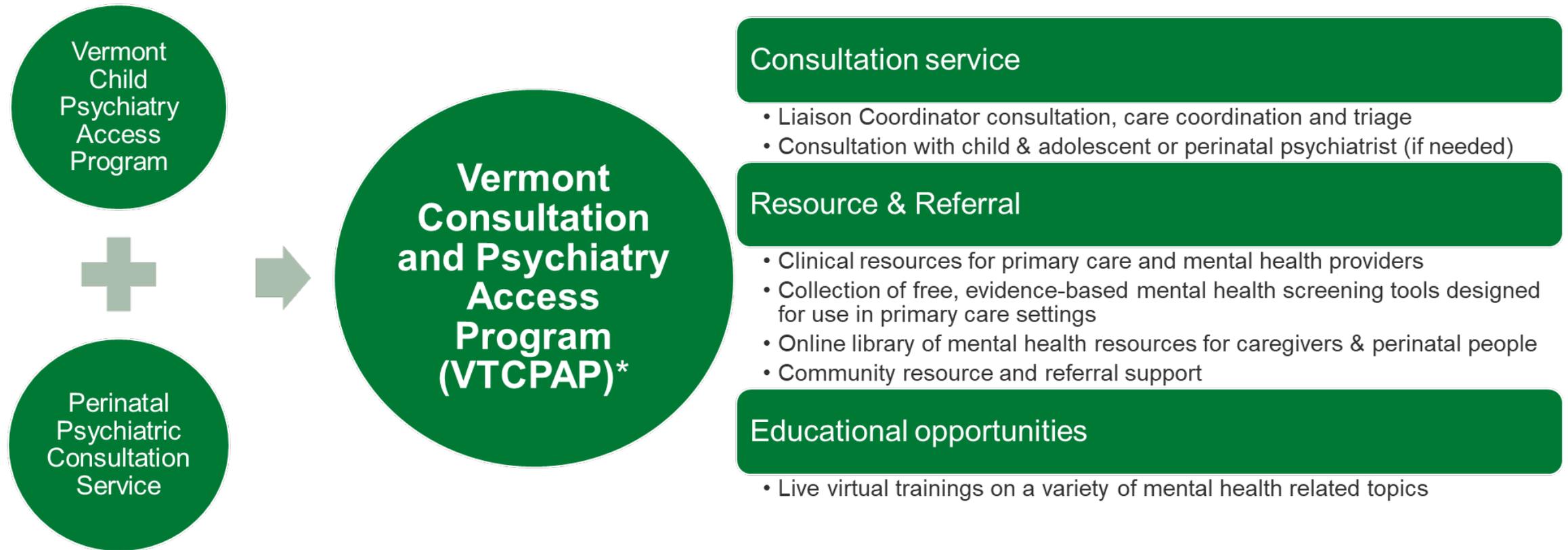


Goal to strengthen mental health **awareness, screening, intervention** and **referral** within Vermont's multi-tiered system of supports (MTSS) in districts/schools



Consultative services and supports for Vermont primary care providers who have questions about mental health diagnosis and treatment planning for children and adolescents (ages 21 and under) and perinatal people.

<https://www.vtcpap.com/>



* Hosted by the VT Program for Quality in Health Care (VPQHC) with some staffing from the UVM Vermont Center for Children, Youth & Families. Funded by two federal awards ([PMHCA](#), [MMHSUD](#)) and Four Pines Fund

CCBHC



CCBHCs are a new model for community-based health care agencies, designed to deliver integrated mental health and substance use disorder services.



The model emphasizes accessible care, tailored to community needs, and addressing barriers to wellness.



Vermont is one of ten states selected to participate in the federal demonstration, which includes an enhanced Federal Medical Assistance Percentage (FMAP) from July 2025 through June 2029.



The first two Vermont CCBHCs went live on July 1, 2025.

CCBHC – 9 Required Services



Crisis services



Outpatient mental health and substance use services



Primary care screening and monitoring



Targeted case management



Screening, assessment, and diagnosis, including risk assessment



Peer support and family & caregiver supports



Integrated services for uniformed service members and veterans



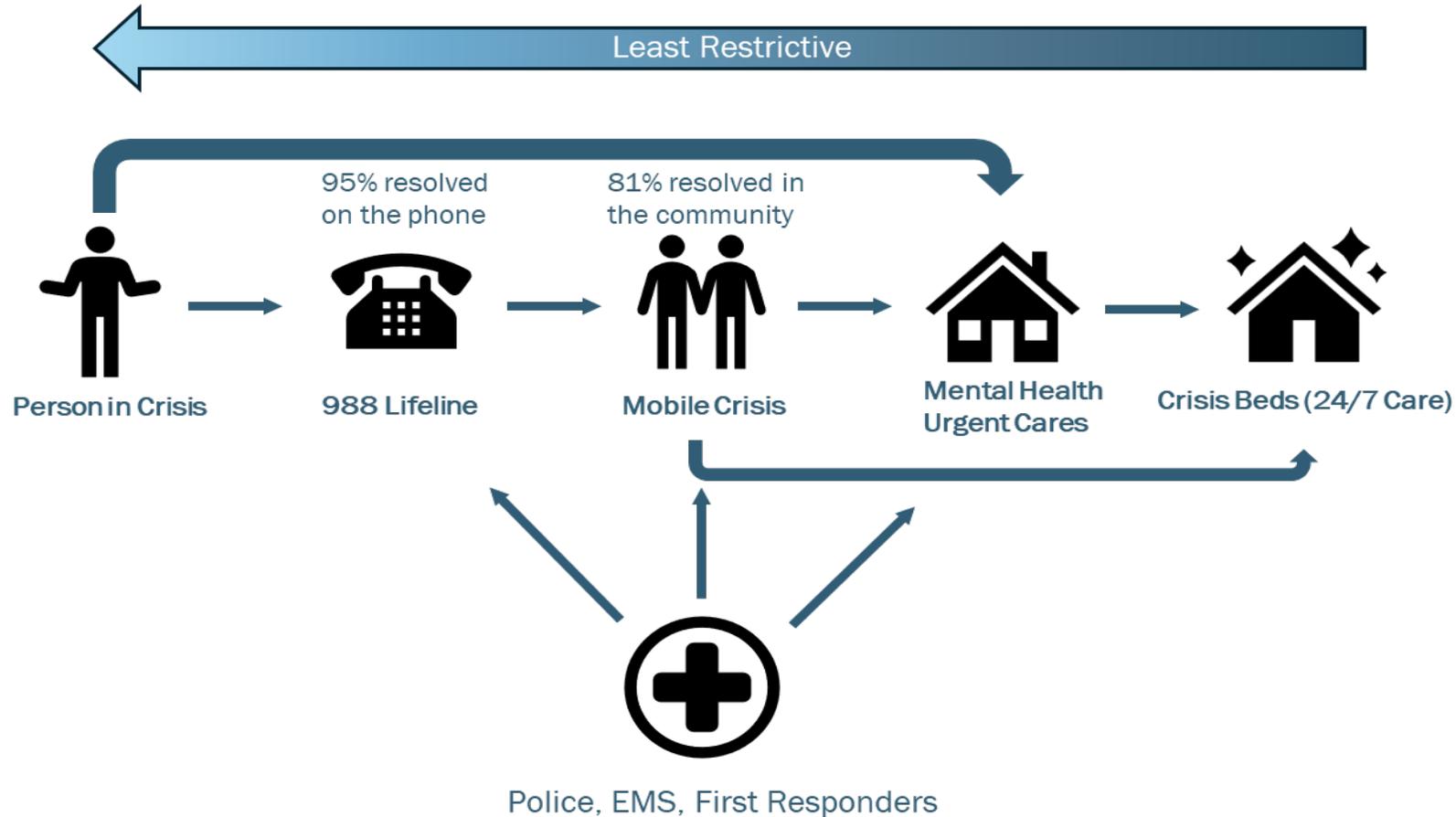
Person and family-centered treatment planning



Psychiatric Rehab Services



CRISIS SYSTEM OF CARE



Integrated Crisis Services in Vermont

This is the crisis continuum of care within the context of the entire mental health and substance use system of care. In Vermont, someone experiencing a mental health or substance use crisis can seek treatment at any point of access.

988: THE VISION



988 offers 24/7 access to trained crisis counselors who can help people experiencing mental health-related distress, thoughts of suicide, mental health or substance use crisis, or any other kind of emotional distress.

People can call or text 988 or chat at 988lifeline.org for themselves or if they are worried about a loved one.

In Vermont, there are two 24/7 988 call centers, NKHS and NCSS, that provide continuous coverage for calls, chats, and texts.

The long-term vision for 988 is to build a robust crisis care response system across the country that links callers to community-based providers who can deliver a full range of crisis care services.

988: IMPACT AND UPDATES



There are around 1,750 calls a month. In November 2025, there were 1,613 Vermont calls with an 82% in state answering rate.



Average of 131 chats, 190 texts per month.



Vermont's goal is to answer more than 90% of calls with an answering rate less than 20 seconds.



A new bidirectional transfer protocol is in place to allow calls to transfer to and from 911 when appropriate

NEW



With 988, Vermonters have access to a crisis counselor 24/7. The caller will always be connected to a live person.



MOBILE CRISIS RESPONSE

What is Mobile Crisis?

- Two-person team responding to a mental health and/or substance use crisis.
- Provides emergency screening and assessment to determine next steps.
- Most crises are resolved in the community - individuals are referred to additional services when needed.
- Includes follow-up services, to check on safety planning and make sure that the crisis has resolved.

Vermont Mobile Crisis

- DMH executed the Statewide Mobile Crisis contract with Health Care & Rehabilitation Services (HCRS) effective January 1, 2024.
- HCRS sub-contracts with the other 9 DAs to provide statewide coverage.
- Available 24/7, statewide

Impact (2025)

- New software (BHL) allows statewide dispatch through 988.
- 83% of encounters were successfully diverted from the hospital and inpatient care.
- 91% of encounters did not include law enforcement.
- 91% of all responses were under 60 minutes.

MENTAL HEALTH URGENT CARES



A Critical Alternative to Emergency Departments

- Immediate, community-based mental health support in a supportive setting. There are currently six programs actively serving Vermonters.



A Much-Needed Service

- Access to timely, compassionate crisis care before a crisis escalates.



Positive Community & Media Response

- High engagement and support - recognized as a transformative approach in mental health crisis intervention.



Building a Stronger Mental Health System

- Ensuring same-day access to person-centered, and stigma-free care.



Sustainable Expansion

- Examining opportunities to expand services at existing, successful sites

APPENDIX

Current* Overall Capacity

Type of Bed	Total Beds	Occupied	Open	Closed	3-Year Average Daily Closed
Adult Inpatient This total includes all adult inpatient at UVMHC, BR, VPCH, RPMC, VA, Windham Center	167	151	9	7	11
Youth Inpatient All inpatient beds for youth are at the Brattleboro Retreat	33	24	8	1	3
Adult Crisis Beds	36	23	11	2	6
Youth Crisis Beds	18	7	5	6	8

*Point in time data from 2/17/2026

**Key for acronyms: UVMHC – University of Vermont Medical Center; BR – Brattleboro Retreat; VPCH – Vermont Psychiatric Care Hospital; CVMC – Central Vermont Medical Center; RPMC – Rutland Regional Medical Center; VA – Veterans Administration

REPORTING

Dashboards and Scorecards:

DMH has transitioned to publicly available [dashboards](#) for information on:

- Designated Agency Caseload Counts
- Mobile Crisis Response
- Success Beyond Six
- DMH Vacancy and Turnover
- Mental Health Urgent Cares

In addition, DMH reports through [multiple public scorecards](#) using the RBA framework.

Reports:

2026 Legislative Reports:

- [Mental Health System of Care: Reforming Vermont's Mental Health System](#)
- [Problem Gambling Program and Expenditures](#)
- [Independent Evaluation of the Administration of Involuntary Non-Emergency Medications Under Act 114](#)

The Department additionally produces an [Annual Statistical Report](#), providing detailed information on supports and services, pressures on community services, goals accomplished, funding information, and future directions.