

Lessons from Candy Land: Transforming the Mental Health Journey through Primary Care Collaboration

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Our Mental Health Journey Begins Here...



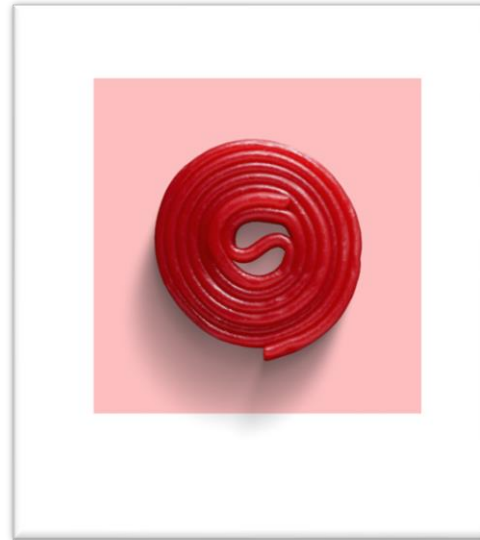
Candy Land in the April Rain: A Parent's Reflection on Mental Health and Getting Stuck Along the Way



Back to Start



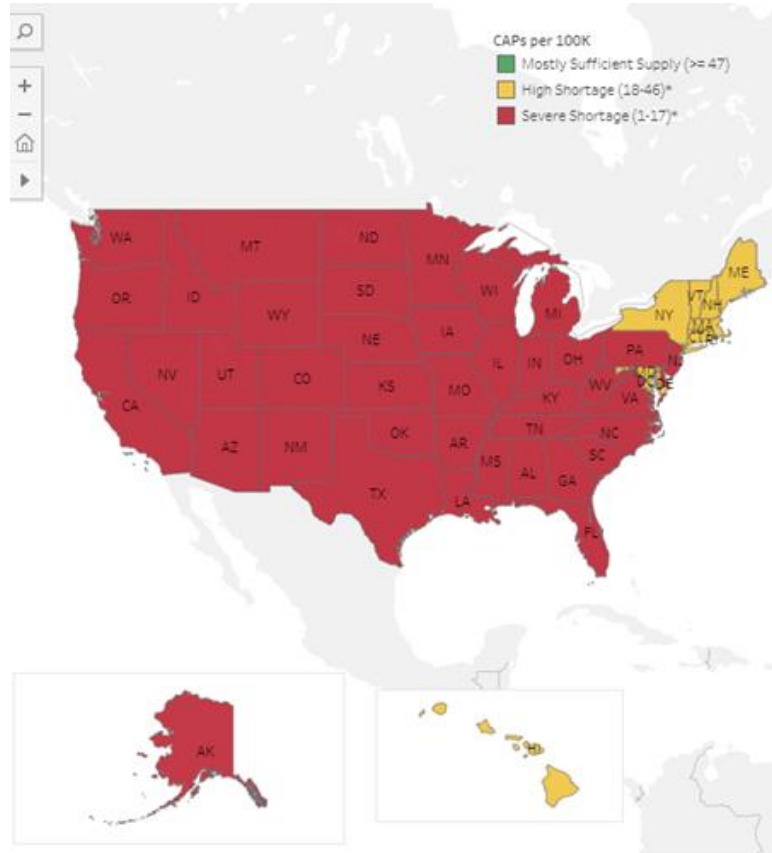
Wait...



Mental Health Care: A Real-Life Candy Land

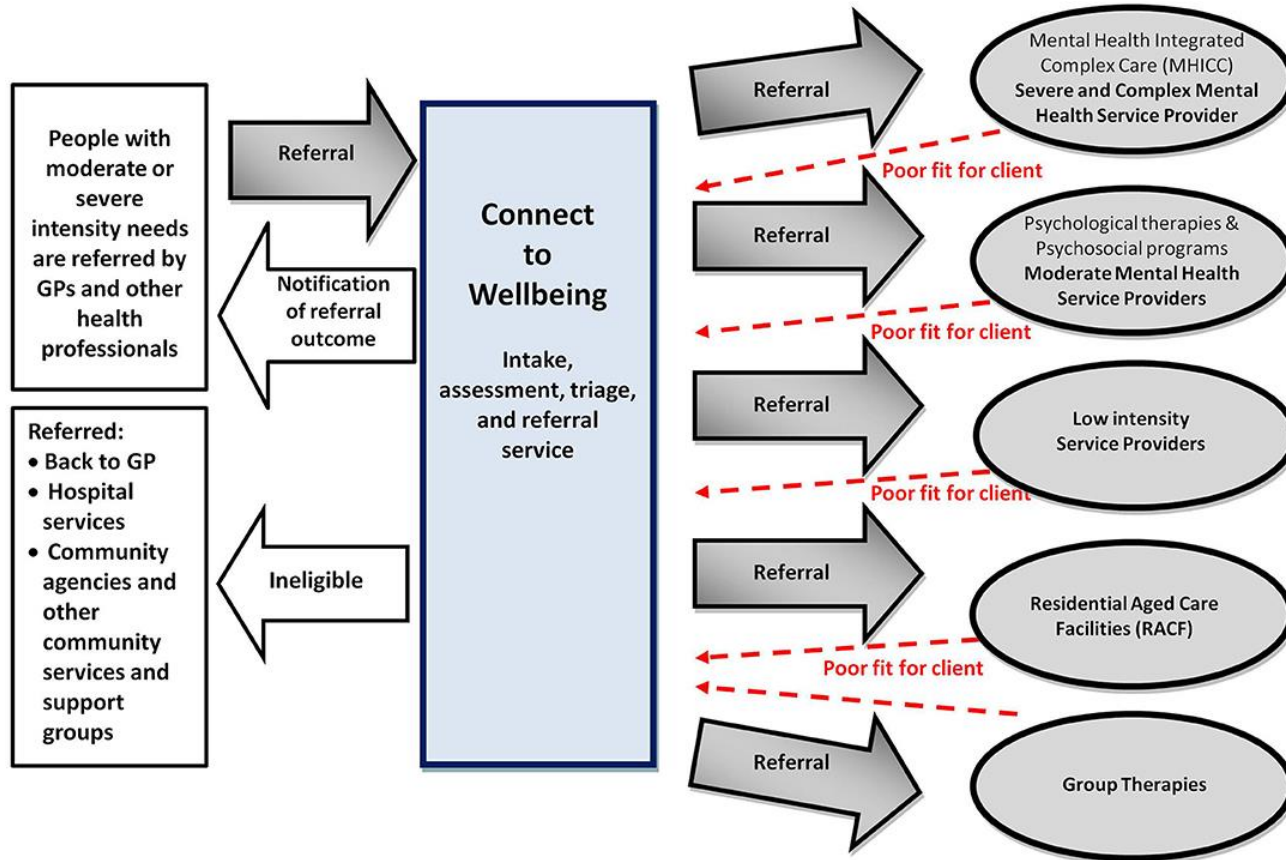
Candy Land	Mental Health System Parallel
Winding path	Confusing and arbitrary referral processes
Drawing cards to move	Lack of control over care steps
Getting sent backwards	Waitlists, insurance delays, and lost progress
Getting stuck	Patient's journey driven by external factors, not choice
Reaching the castle	Achieving stability with quality mental health care

Navigating Candy Land Without Enough Candy: Growing Mental Health Needs and Resource Mismatch



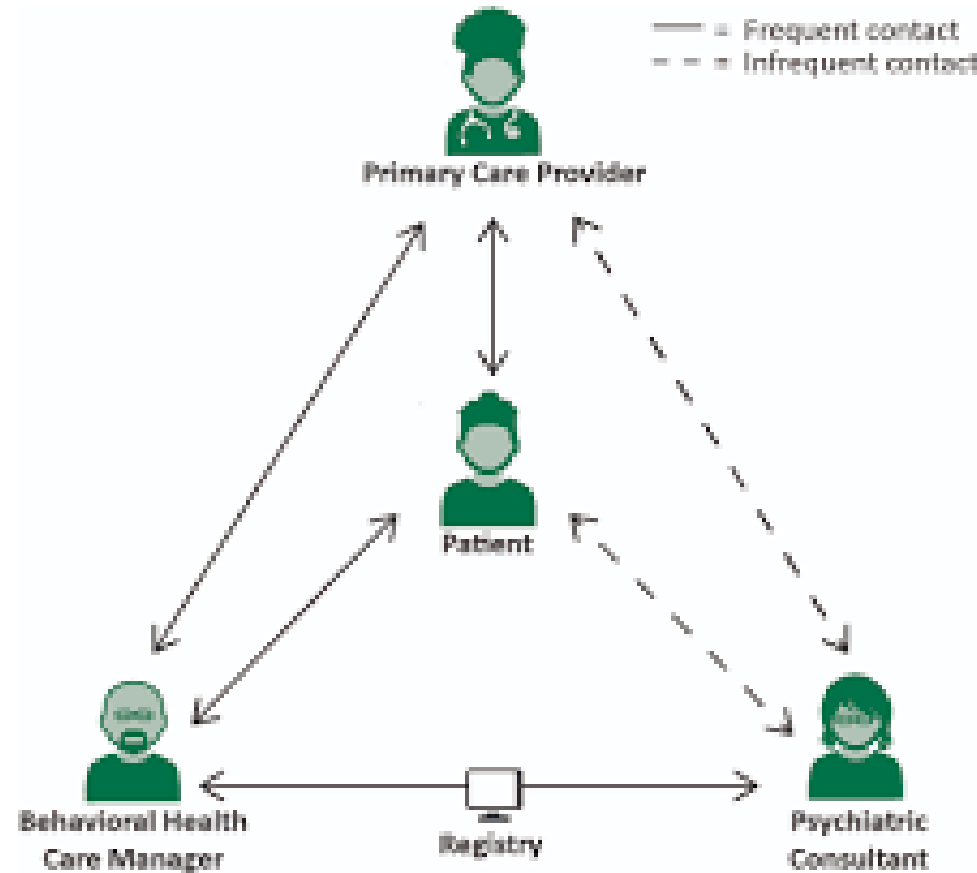
- Gap between resources and need - 99%
- Historic Psychiatry Waits
 - Adults – 145 days (or 21 weeks or 4.8 months)
 - Children – 167 days (or 24 weeks or 5.5 months)

Primary Care Fills Gaps in Mental Health Care



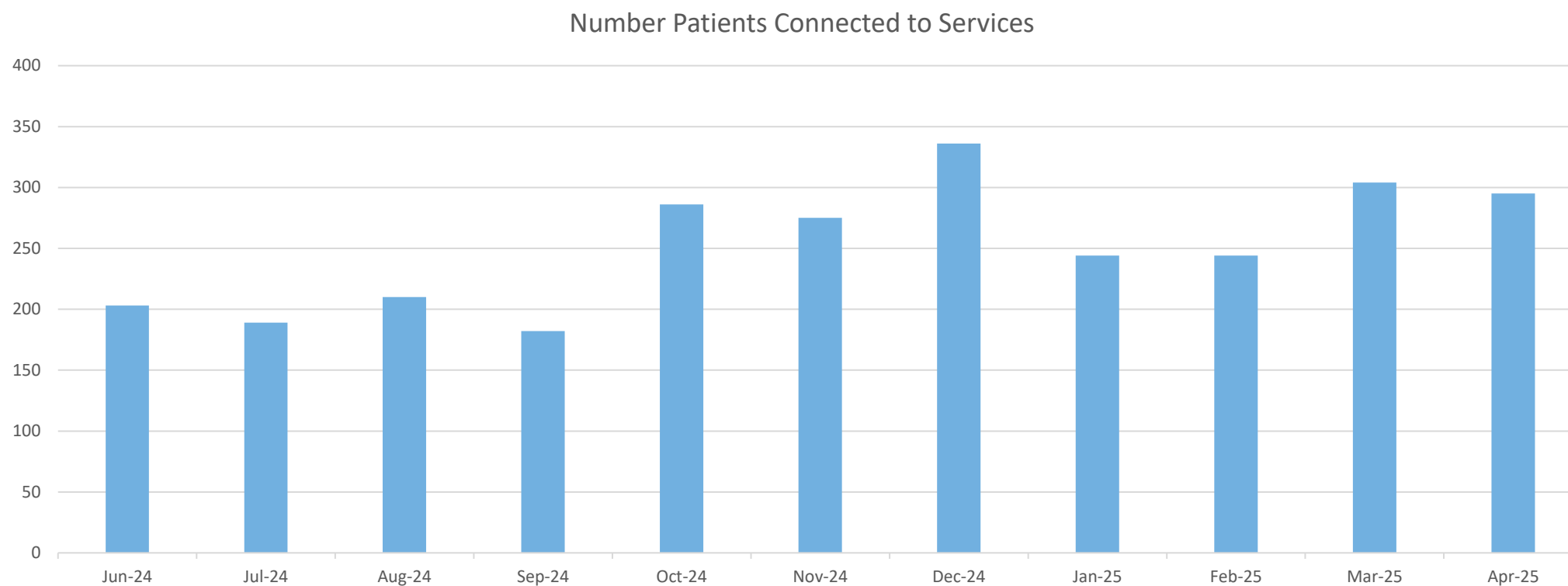
- 60% of mental health care is done in Primary Care.
- 50% of patients don't follow through on a referral "out"
- Primary Care providers prescribe 79% of antidepressant medications and 60% of all psychotropic medications

Clearing the Path: Primary Care Mental Health Integration (PCMHI)



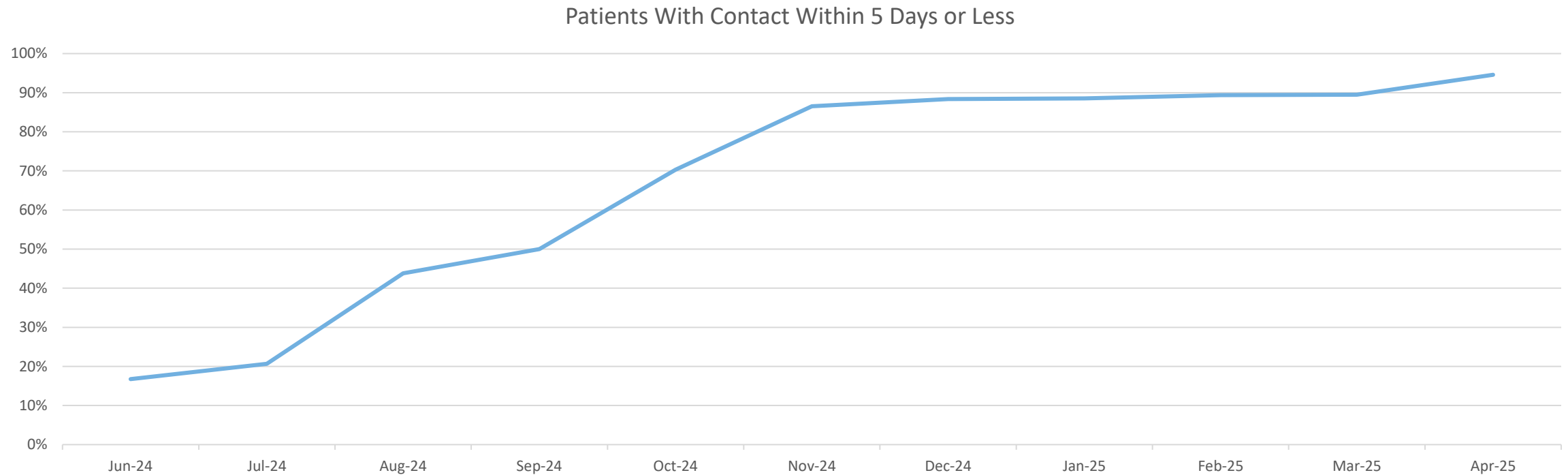
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Impact - Easy Access



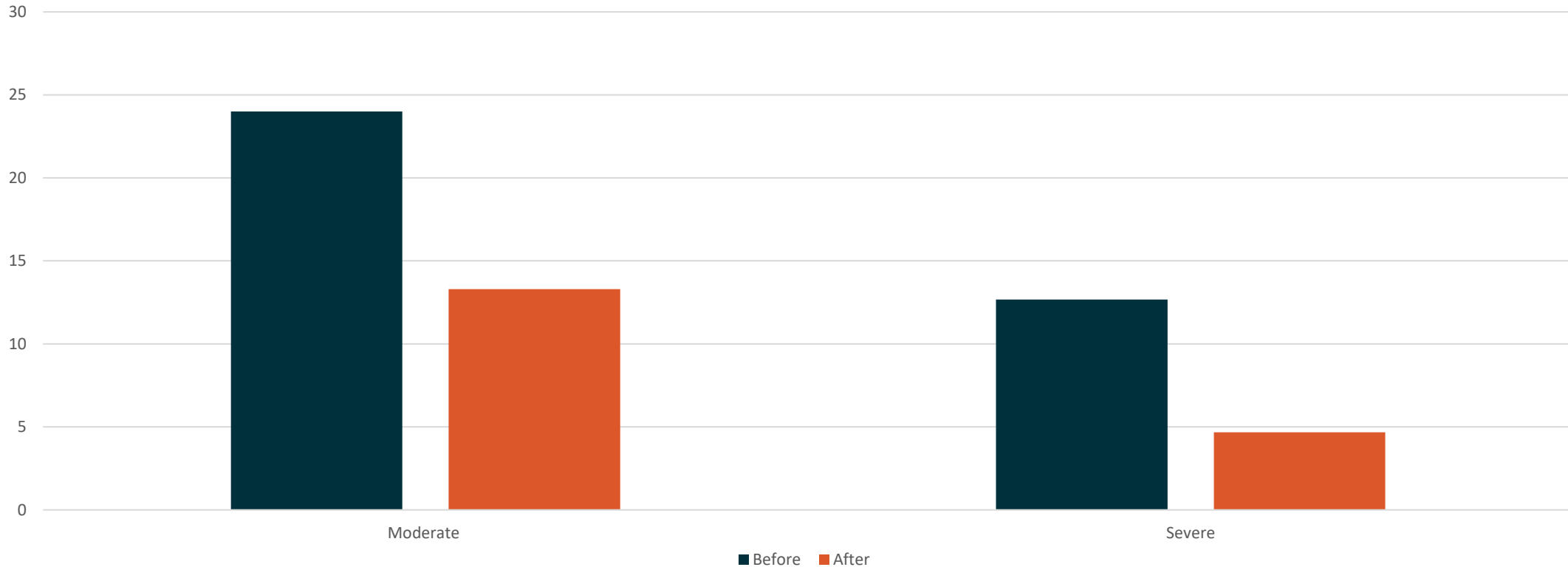
Highlight: 1,790 unique patients served who otherwise would not have had access to mental care at all.

Impact - Fast Access



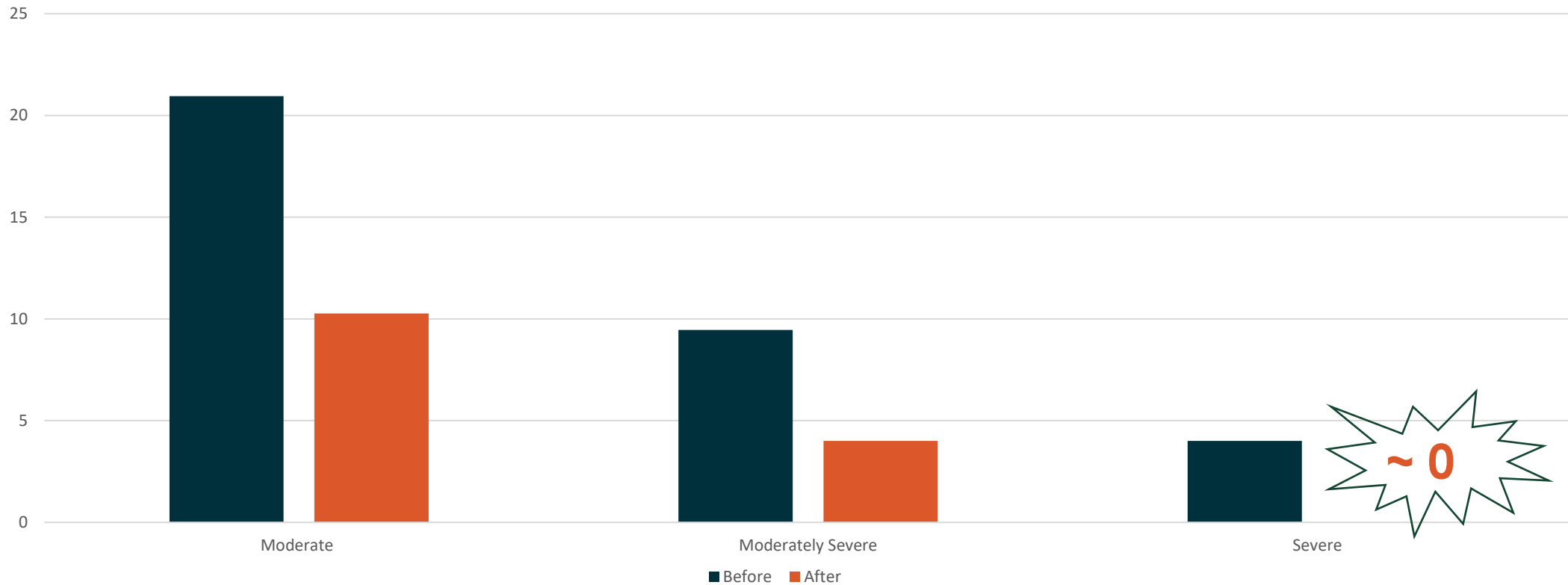
Highlight: 97% of referred patients engaged in their first touch point with mental health care within 5 days.

Rapid Improvements in Mental Health: Anxiety Scores



Highlight: Anxiety scores improved by 26% over just three months.

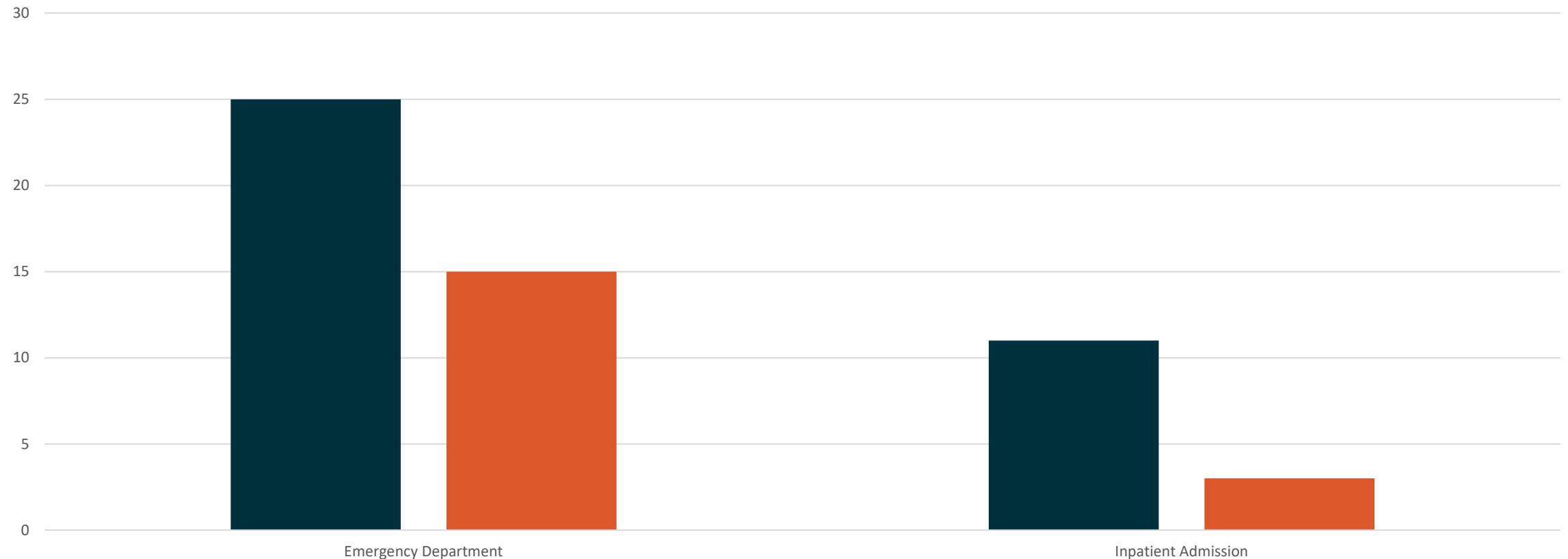
Rapid Improvements in Mental Health: Depression Scores



Highlight: Depression scores improved by 23% over just three months.

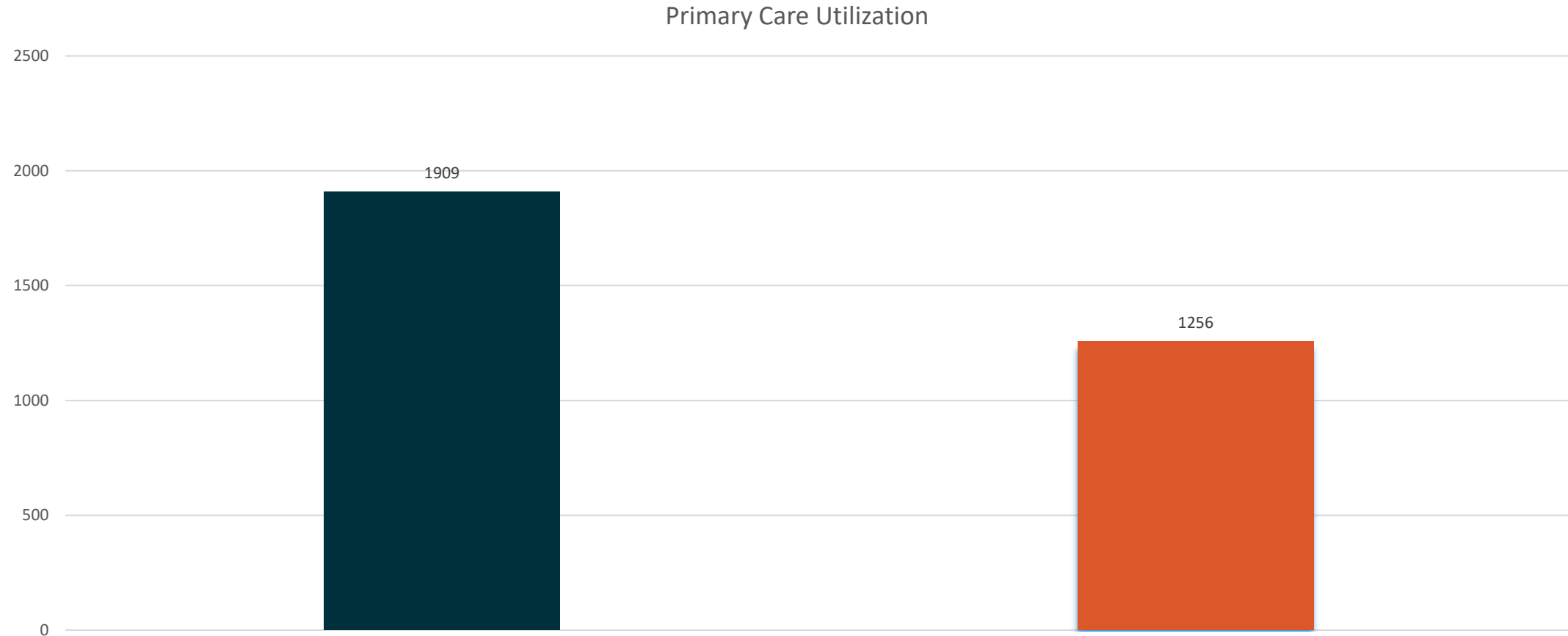
System Impact: Right Care, Right Place, Right Time

Acute Service Utilization



Highlight: Reduction of Emergency Department utilization and inpatient admissions.

System Impact: Reduction in Acute Use of Primary Care

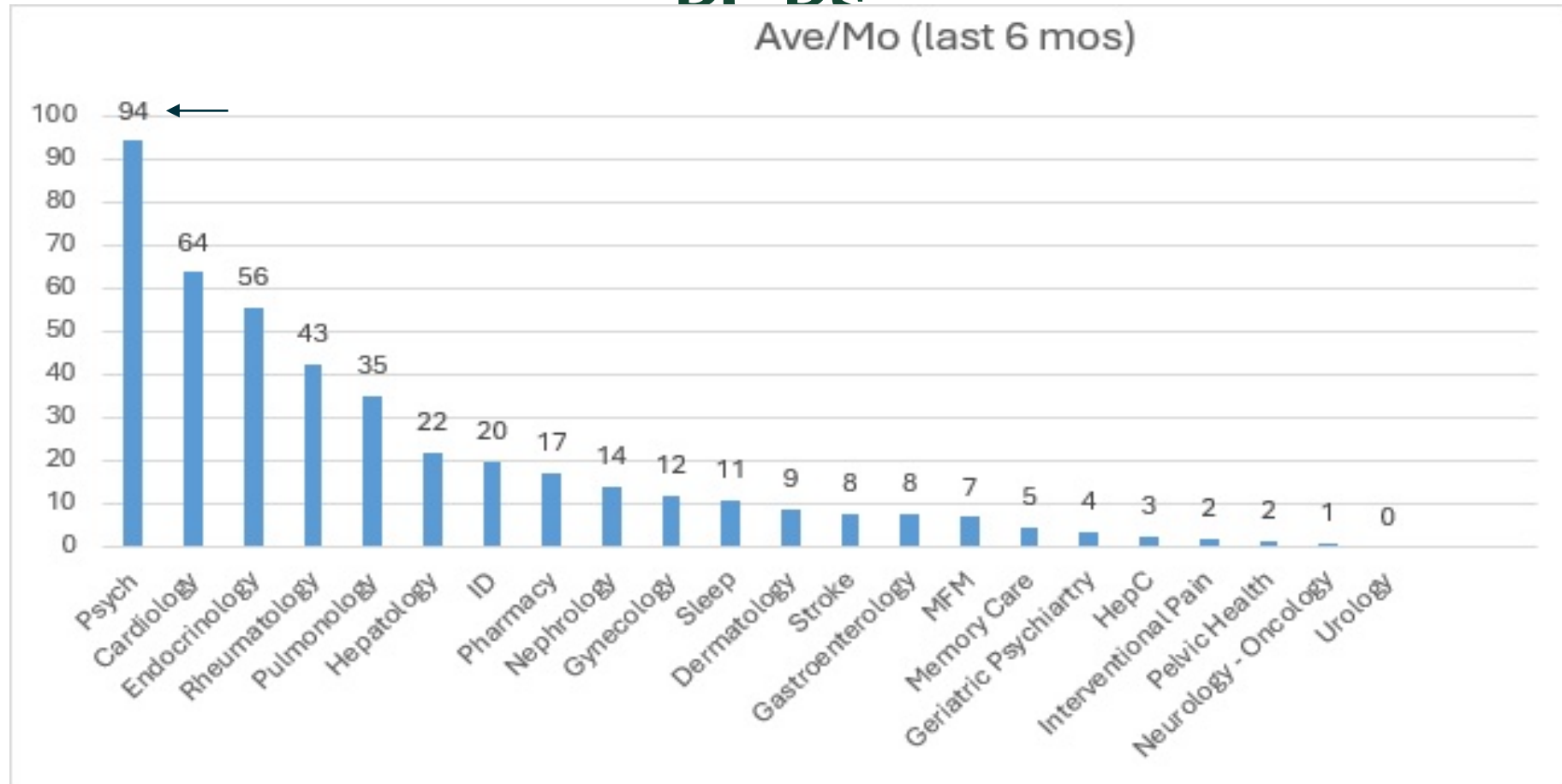


Creative Solutions: Mental Health Mini-Fellowship Series



Highlight: 98-99% PCP satisfaction with the practical clinical value of educational series.

Expert Support, No Waitlist: E-consults Empower DCDs



Highlight: Average of 94 e-consults per month. Totals - 612 in 2024; 654 in 2025.

Estimated to have prevented 70% of “refer out” outpatient psychiatry referrals.

Scaling What Works and Future Directions

Mental health access in the 22 medical homes at all primary care practices across UVMHC, Porter, and CVMC, and moving to NY state sites.



Areas Supported by Philanthropy

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