

Community Health Needs Assessment Implementation Plan, 2025-2027

A. Enhance Mental Health Services for Youth and Families:

Goal:	Year One Update
Develop and open a PRTF residential program for adolescents, addressing a critical gap in the system of care in Vermont	Program development is complete, and we continue to anticipate launch of the program in 2026 or 2027, pending construction/renovation timeline and contracting.
Develop and open a telehealth Adolescent PHP/IOP program	In progress, anticipated opening in Summer 2026.
Increase child/Adolescent Capacity in Anna Marsh Clinic	Added clinicians in this program with child/adolescent specialty, helping to increase access and decrease waitlist.
Explore collaboration and partnerships with pediatric providers to help provide access and treatment services	Pediatric service providers are not currently available for such collaboration, but will continue to discuss ways of streamlining collaboration and referral processes.

B. Address Health Disparities and Promoting Health Equity:

Goal:	Year One Update
Conduct further analysis of the CHNA data to identify specific health disparities among underserved populations.	Continues to be in progress
Expand staff training in culturally and linguistically appropriate mental health services tailored to the needs of these populations.	Trainings have been expanded for 2026 calendar year and are currently assigned to all hospital staff.
Strengthen partnerships with community-based organizations that serve BIPOC and LGBTQIA+ individuals.	DEI Committee Chair has been working to expand relationships with community groups/organizations where there are areas of overlap in our work. This included, for example, the Retreat's Pride Month efforts in June 2025, including support of local events and celebrations, and educational initiatives.
Provide training to Retreat staff on cultural competency and implicit bias.	Trainings have been expanded for 2026 calendar year and are currently assigned to all hospital staff.

Conduct disability accessibility audit of campus, and create action plan to address results	Continues to be in progress
As a best practice, evaluate and adopt a model of ensuring accurate client demographic information is collected	EHR workflow transition slowed formal adoption of changes to demographic data collection and validation, but work remains in process.
Whenever possible, analyze demographic data for disparities when conducting analysis of quality metrics	EHR transition in 2025 slowed ability to gather some health disparity data, but other data has been added into regular reporting of quality metrics and more will continue in the implementation period.
Work to actively recruit and retain clinicians from widely varied backgrounds	Continuing in process

C. Foster Community Collaboration and Integration of Care:

Goal:	Year One Update
Solidify partnerships with Brattleboro Memorial Hospital and other community health and social service providers	We have continued partnerships with BMH that were existing (embedded clinicians in primary and specialty care) as well as instituted a new relationship to provide psychiatric and consultation services in BMH ER.
Pursue sustainability of grant-funded multi-agency Healthworks ACT Team collaboration, which serves individuals in the community who are unhoused or housing insecure and significant mental health challenges	Healthworks ACT work continues, serving this population, and has expanded existing caseloads of served individuals; the program continues to seek sources of sustainable funding.
Enhance communication and referral pathways between the Retreat and social service agencies addressing housing, food insecurity, and other social determinants of health.	Continued active collaborations, including with One Brattleboro and Accountable Communities for Health, in which the community works collaboratively to address complex problems at the intersection of health, mental health, and social service systems.
Participate actively in the Accountable Communities for Health (ACH) and other collaborative initiatives.	Active participation on this group and its steering committee.

Explore expanding psychiatric staff consultation in emergency room settings across the State	Expanded this to BMH ED as above.
Actively participate in the healthcare reform and transition in the State of Vermont, to ensure the long-term sustainability of mental health services with and among the larger landscape and systems of care	Actively participate in healthcare reform and transition efforts, including rural healthcare transformation initiatives and the exploration of potential regionalization efforts among service providers.

D. Improving Community Awareness and Reducing Stigma Related to Mental Health:

Goal:	Year One Update
Develop and implement public awareness programs to reduce stigma and promote help-seeking.	Gary Gulman educational event for community in Summer 2025 (depression education, treatment information) and a variety of public education initiatives including the <i>Unravelling</i> podcast; scheduled more events for 2026 (Fall) including creative community collaborations.
Offer mental health education and training to community members, educators, and first responders.	Spring lecture series 2025 and 2026 are offering mental health education to the larger community including efforts described above (public awareness, stigma reduction). Launched monthly newsletter that is educational in nature.
Partner with local media to share stories of recovery and promote positive messaging around mental health and substance use.	We continued to produce monthly (sometimes more) frequent articles in local and regional media that are educational and mental health positive/promoting.
Disseminate information about available mental health and addiction resources through various channels.	Launched newsletter in 2025, have robustly used collaborations, events, social media messaging, etc. to disseminate information.

E. Increase access to Care by Reducing Barriers to Care:

Goal:	Year One Update
Continue partnership with Rescue Inc. to provide emergency room transportation to psychiatric hospital care across the State,	We have continued this partnership to continue to allow access across the State.

and evaluate other transportation needs and solutions	
Reduce waiting-list times for psychotherapy in Anna Marsh Clinic	Waiting list times have been reduced and/or eliminated in Anna Marsh Clinic because of initiatives to promote access including adding clinician time and resourcing, etc.
Develop and open a discharge follow-up clinic, for post-hospital short-term follow-up psychiatric care and coordination	Project management work to open the discharge follow-up clinic is underway.