



Emergency Department Data

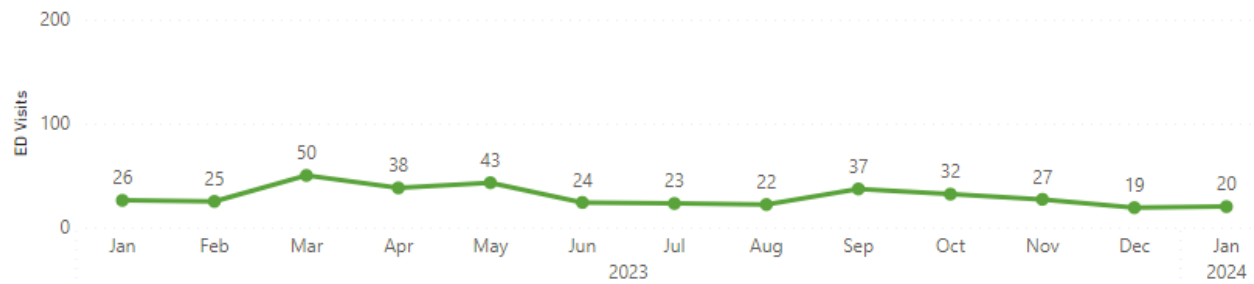
From January 2023 through January 2024, there were 1,578 visits to Vermont emergency departments for youth with a chief complaint that was related to a mental health condition. These numbers can include visits where a youth is boarding waiting for inpatient or community placement, or visits that are solely outpatient in nature where youth are discharged back to home or to referral for mental health services.

Of these visits, 386 youth waited more than 24 hours for discharge from the ED (about 24-25%). The charts below are specific to youth waiting more than 24 hours.

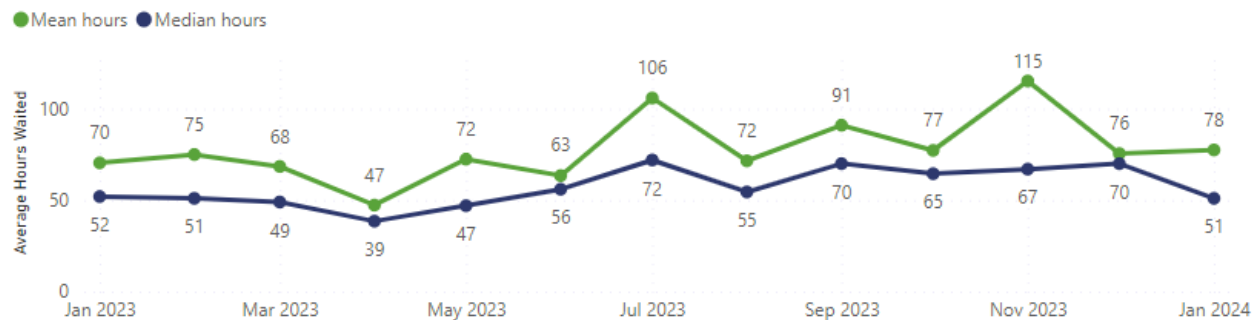
Observations:

- ED volumes have decreased from March 2023, but we continue to see 20 youth a month who are waiting more than 24 hours for discharge to placement.
- Median and mean wait times continue to be long. In January 2024, 50% of youth waiting more than 24 hours waited more than two days. Average LOS continues to be closer to 3 days.
- Of the youth waiting more than 24 hours, 20% in January 2024 left the next day after arrival and 80% were waiting multiple days.

ED MH Visits for youth: Visits per month (Jan 2023 – Jan 2024)



ED MH Visits for youth: average wait times per month (Jan 2023 – Jan 2024)



Inpatient Data

At the inpatient level, since October 2023, there has been an average of 9 post-acute adolescent patients per month. At times, more than half the youth inpatient census has been post-acute. These patients are waiting for placement to be identified and approved, waiting for placement to become available, or have not been picked up by a guardian on the discharge date



Data Notes

- VAHHS, through agreements with the Vermont Department of Health and the Department of Mental Health, has access to Vermont's syndromic surveillance system, called ESSENCE. ESSENCE collects near real-time data from emergency departments (ED) in Vermont. Any analysis and publication of this data is subject to VDH approval. This data is also considered draft and subject to change.
- A hospital's participation in ESSENCE may fluctuate over time.
- Mental health-related visits are defined as visits where the patient's chief complaint history contains information that indicates they are presenting for a mental health complaint.
- There are limitations with syndromic surveillance data. The number of hospitals reporting has varied over time, data outages may occur, and the fields used to determine mental health-related visits may be missing or incomplete. This may lead to an over or underestimation of visits related to mental health.