TO: Senate Health and Welfare Committee

Senate Judiciary Committee

House Human Services Committee

House Judiciary Committee

FROM: Burlington Business Association

Burlington Police Department Fletcher Allen Health Care

HowardCenter

Mayor, City of Burlington

Spectrum Youth and Family Services United Way of Chittenden County

DATE: February 7, 2014

SUBJECT: Mental Health Acuity in Burlington

As we consider important issues that will be addressed during the 2014 legislative session, the organizations represented on this letter have come together to highlight issues and opportunities that impact Vermont's mental health treatment system and the policies that govern it.

Anecdotal reports from Chittenden County community providers, Fletcher Allen's Emergency Department and the Burlington Police Department suggest that Vermonters with more significant mental health acuity challenges than we have routinely seen in the past are presenting for, seeking, or needing services. Enhanced community resources allocated by Act 79 and expanded acute care beds allocated by Vermont's hospitals have helped. Nevertheless, the local system of care continues to be challenged.

What we are seeing:

- The Burlington Police Department reports that responses to calls exclusively of a mental health nature, not including other events that may be driven by an underlying mental health issue, have increased annually in Burlington from 150 in 2008 to a projected 671 in 2013.
- While HowardCenter's adult crisis team had roughly the same total number of contacts (5000+) and face-to-face interactions (1900+) with clients in crisis between FY'12 and FY'13, the acuity of patient served was substantially higher in FY'13 as evidenced by the number of involuntary admissions for inpatient care which increased by 144%.
- Fletcher Allen reports the length of time spent in the Emergency Department awaiting admission to our inpatient units or discharge to a different care setting has doubled, and in some months tripled, over the past 12 to 18 months (an average of 128 patients in the ED each month for the past 18 months, waiting an average of 8 hours for placement or discharge). Patients under 17 are waiting, on average, longer than adults.
- The statewide *median* waiting time from the date of inpatient admission to the date of the involuntary medication court order from January 2012 to November 2013 was 56 days.

We have come together to understand the data, and to offer our assistance and expertise in tackling some of the challenges and opportunities we see. Vermont's mental health treatment system was under stress before Tropical Storm Irene. This current transitional period has been particularly challenging. We commit to working with policymakers to improve the timeliness of access, enhance the appropriateness of first responder support, and improve patient placement compatibility. We are hopeful that understanding the data will help to shape policy and practice which will benefit the health and safety of the Vermonters we serve, their families and the community at large.

Below are specific areas that we believe can benefit from more attention and discussion:

- How to expand capacity to serve patients in crisis
- How to more effectively accommodate mental health emergency room needs
- How the judicial system can support timely treatment decisions
- How to accommodate patients with mental health issues who are being served by the Department of Corrections
- How to enhance coordination of emergency response between community first responders (police, firefighters, and EMTs) and mental health crisis support

When the Vermont Psychiatric Care Hospital opens, there will be a reduction in "Level 1" beds at Fletcher Allen as well as the closure of the Morrisville facility. Even with the enhanced Act 79-supported local and statewide community resources, which were much needed, the number of required Level 1 beds statewide continues to be an unanswered question. We would hope that contingency discussions can be actively pursued.

We stand ready to continue this frank conversation with policymakers, and hope that our on-thestreet perspectives can help inform and further the discussion as we continue to build a model and improved mental health system in Vermont.