



State of Vermont
Department of Mental Health
Commissioner's Office
Redstone Office Building
26 Terrace Street
Montpelier VT 05609-1101
<http://mentalhealth.vermont.gov/>

Agency of Human Services

[phone] 802-828-3824
[fax] 802-828-1717
[tty] 800-253-0191

MEMORANDUM

TO: Joint Legislative Mental Health Oversight Committee
Joint Health Care Committee

FROM: Paul Dupre, Commissioner of the Department of Mental Health 

DATE: September 25, 2013

RE: September, 2013 Monthly DMH Report to the Mental Health and Health Care Oversight Committees

Attached please find the September, 2013 report to the Committees on Mental Health and Health Care as outlined in *2012 Acts and Resolves No. 79*. Additionally, information that the Department believes will be responsive to data collection requests is incorporated.

I. Act 79 Requirements

1. Number of individuals receiving acute inpatient psychiatric care (Level 1, general involuntary) in all hospitals, and the single combined one-day highest census number (Level 1).
2. The number of individuals waiting for admission, including the number of individuals treated in each setting and the single combined one-day highest census number each month.
3. The total census capacity and average daily census of intensive recovery residence beds, and the secure residential (MTCR) daily census; average length of stay for crisis beds across the state system of care.

II. Additional Data in Appendices

- Appendix 1 - Adult Inpatient Utilization and Bed Closures
- Appendix 2 - People Awaiting Inpatient Placement
- Appendix 3 - Vermont Department of Mental Health System Snapshot
- Appendix 4 - Level 1 Stays by Inpatient Hospitals
- Appendix 5 - Designated Hospital Inpatient Capacity
- Appendix 6 - Wait Times in Hours for Involuntary Patient Admission
- Appendix 7 - Wait Times in Days for Involuntary patient Admission

Respectfully submitted by the Department of Mental Health. Please direct any inquiries for additional data collection or report content development to Susan Onderwyzer at susan.onderwyzer@state.vt.us

Joint Legislative Mental Health Oversight and Health Care Committees

Department of Mental Health September FY 2013 Report

9/25/13

This report provides information required by the 2012 *Acts and Resolves No. 79*, as well as information that has been requested by Oversight Committee members. The questions are followed by both data and a narrative explanation.

Act 79 Requirements pertaining to LEVEL I BEDS

(1) The number of Level 1 patients receiving acute inpatient care in a hospital setting other than the renovated unit at Rutland Regional Medical Center (RRMC), the renovated unit at the Brattleboro Retreat (BR), and Green Mountain Psychiatric Care Center (GMPCC), including the number of individuals treated in each setting, and the single combined one-day highest number each month. The following Tables depict this data:

- A. Legislative Report to Mental Health Oversight Committee and Health Care Oversight Committee: Level 1 Inpatient Utilization: Statewide and By Hospital
- B. Legislative Report to Mental Health Oversight Committee and Health Care Oversight Committee: Level 1 Inpatient Utilization: Statewide Condensed Report

Tables A. and B. present both the total system of psychiatric beds and reports on utilization for each hospital. The first table represents the total # of *designated LEVEL I beds* in our system (including FAHC), the average daily census, the number of admissions to *non designated LEVEL I hospital beds*, the highest census per month and the trend of whether the system is over or under its designated capacity.

August data show that there were an average of 4 people classified as Level I in hospital beds that are not designated as such; there are 35 designated beds and there was an average daily census of 39 Level I patients. This is the difference between the average daily census and the number of beds designated for Level I patients. Individuals can be admitted to a non-Level I bed and may or may not later be transferred to a Level I unit. DMH data sources identify placement at admission to the hospital. BR, FAHC and RRMC were both over utilization capacity for the month of August, while GMPCC was under capacity. The actual numbers of these beds at smaller units/hospitals is quite small as can be seen on the Table below. GMPCC had a particularly acute group of patients during the month of August and as a result, they were not able to use all of their beds for a period of 22 days. This occurs across the system, when there are patients who require high levels of support and resources.

The factors influencing whether or not a unit can be at full capacity, 24/7 are variable; they include the number of individuals who are in need of constant supervision by 1-3 staff, staffing levels during times of high acuity, and data does not account for the process of preparing rooms for individuals, which sometimes takes upwards of 2-4 days. These factors were all contributors to the days that GMPCC was not admitting new patients.

Wait times describes the number of days that a patient must await admission to the psychiatric unit/hospital and waits in an Emergency Department of any local hospital or at a correctional facility for placement at an inpatient psychiatric unit. According to our data for inpatient admissions, there was an average of 4 people waiting for admission to a psychiatric unit/hospital each day during August, with an average wait time of 1.1 days.

When computing capacity for inpatient psychiatric treatment, DMH looks at the number of contracted beds for Level I patients, the total number of beds for all persons in need of treatment, and the number of persons who are waiting for admission to a hospital. Data is available for involuntary admissions and for voluntary admissions who present to emergency departments and determined to require hospitalization. It is anecdotally reported that there are likely individuals who are either not referred for assessment or present for potential voluntary psychiatric hospitalization and are discharged from emergency departments with alternative plans given lack of current bed capacity. Projective capacity numbers are not currently reported to DMH.

Legislative Report to Mental Health Oversight Committee and Health Care Oversight Committee
 Level 1 Inpatient Utilization: Statewide and By Hospital

| | 2012 | | | | | | | | | | | | 2013 | | | | | | | | | | | | | | | | |
|-------------------------------------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|------|------|------|------|-------|-------|-------|-------|-------|-------|------|------|------|------|------|------|------|------|----|
| | Jul | Aug | Sep | Oct | Nov | Dec | Jan | Feb | Mar | Apr | May | Jun | Jul | Aug | Jul | Aug | Sep | Oct | Nov | Dec | Jan | Feb | Mar | Apr | May | Jun | Jul | Aug | |
| SYSTEM TOTAL | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Total Level I Beds | 27 | 27 | 27 | 27 | 27 | 27 | 27 | 27 | 27 | 27 | 27 | 27 | 27 | 27 | 27 | 27 | 27 | 27 | 27 | 27 | 27 | 27 | 27 | 27 | 27 | 27 | 27 | 27 | 27 |
| Average Daily Census | 15 | 19 | 23 | 25 | 24 | 24 | 29 | 29 | 32 | 37 | 45 | 44 | 38 | 39 | 35 | 35 | 35 | 35 | 35 | 35 | 35 | 35 | 35 | 35 | 35 | 35 | 35 | 35 | 35 |
| Total Level I Admissions this Month | 23 | 17 | 9 | 25 | 13 | 21 | 22 | 13 | 20 | 22 | 26 | 10 | 19 | 16 | 22 | 22 | 22 | 22 | 22 | 22 | 22 | 26 | 10 | 10 | 10 | 19 | 16 | 16 | |
| Level 1 Admissions to Non-L1 Units | - | - | - | - | - | - | - | - | - | - | - | - | - | - | - | - | - | - | - | - | - | - | - | - | - | - | - | - | - |
| Total Level 1 Discharges this Month | 6 | 15 | 7 | 19 | 21 | 15 | 17 | 17 | 13 | 15 | 19 | 17 | 19 | 17 | 17 | 17 | 13 | 15 | 15 | 19 | 15 | 19 | 17 | 13 | 15 | 19 | 17 | 17 | |
| Highest Census this Month | 19 | 22 | 24 | 31 | 29 | 28 | 32 | 31 | 34 | 41 | 48 | 48 | 41 | 41 | 32 | 31 | 34 | 41 | 41 | 48 | 48 | 48 | 48 | 48 | 48 | 41 | 41 | 41 | |
| Over/Under for Total Planned Beds | UNDER | UNDER | UNDER | UNDER | UNDER | UNDER | UNDER | UNDER | UNDER | UNDER | OVER | OVER | OVER | OVER | UNDER | UNDER | UNDER | UNDER | UNDER | UNDER | OVER | OVER | OVER | OVER | OVER | OVER | OVER | OVER | |
| BY HOSPITAL | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Brattleboro Retreat | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Total Level I Beds | 14 | 14 | 14 | 14 | 14 | 14 | 14 | 14 | 14 | 14 | 14 | 14 | 14 | 14 | 14 | 14 | 14 | 14 | 14 | 14 | 14 | 14 | 14 | 14 | 14 | 14 | 14 | 14 | |
| Average Daily Census | 11 | 14 | 18 | 18 | 17 | 15 | 14 | 16 | 19 | 18 | 21 | 20 | 16 | 17 | 14 | 16 | 19 | 18 | 21 | 21 | 20 | 21 | 20 | 21 | 20 | 16 | 17 | 17 | |
| Total Admissions during Month | 16 | 13 | 8 | 13 | 9 | 14 | 7 | 9 | 10 | 3 | 11 | 3 | 3 | 3 | 7 | 9 | 10 | 3 | 11 | 3 | 11 | 3 | 11 | 3 | 3 | 3 | 3 | 3 | |
| Level 1 Admissions to Non-L1 Units | - | - | - | - | - | - | - | - | - | - | - | - | - | - | - | - | - | - | - | - | - | - | - | - | - | - | - | - | |
| Total Level 1 Discharges this Month | 4 | 9 | 6 | 12 | 14 | 13 | 7 | 7 | 7 | 5 | 7 | 8 | 3 | 2 | 7 | 7 | 7 | 5 | 7 | 5 | 7 | 7 | 8 | 7 | 8 | 3 | 2 | 2 | |
| Highest Census this Month | 13 | 16 | 19 | 21 | 20 | 17 | 16 | 18 | 20 | 20 | 22 | 22 | 17 | 18 | 16 | 18 | 20 | 20 | 22 | 22 | 22 | 22 | 22 | 22 | 22 | 17 | 18 | 18 | |
| Over/Under for Total Planned Beds | UNDER | UNDER | OVER | OVER | OVER | OVER | OVER | OVER | OVER | OVER | OVER | OVER | OVER | OVER | OVER | OVER | OVER | OVER | OVER | OVER | OVER | OVER | OVER | OVER | OVER | OVER | OVER | OVER | |
| RRMC | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Total Level I Beds | 6 | 6 | 6 | 6 | 6 | 6 | 6 | 6 | 6 | 6 | 6 | 6 | 6 | 6 | 6 | 6 | 6 | 6 | 6 | 6 | 6 | 6 | 6 | 6 | 6 | 6 | 6 | 6 | |
| Average Daily Census | 3 | 4 | 3 | 4 | 4 | 4 | 4 | 4 | 3 | 9 | 9 | 10 | 8 | 8 | 4 | 1 | 3 | 9 | 9 | 10 | 10 | 10 | 10 | 10 | 10 | 8 | 8 | 8 | |
| Total Admissions during Month | 7 | 4 | 1 | 5 | 1 | 4 | 2 | 0 | 5 | 8 | 8 | 2 | 4 | 5 | 2 | 0 | 5 | 8 | 8 | 2 | 4 | 2 | 4 | 2 | 4 | 4 | 5 | 5 | |
| Level 1 Admissions to Non-L1 Units | - | - | - | - | - | - | - | - | - | - | - | - | - | - | - | - | - | - | - | - | - | - | - | - | - | - | - | - | |
| Total Level 1 Discharges this Month | 2 | 6 | 1 | 3 | 3 | 1 | 5 | 2 | 0 | 4 | 8 | 2 | 6 | 6 | 5 | 2 | 0 | 4 | 8 | 2 | 6 | 2 | 6 | 2 | 6 | 6 | 6 | | |
| Highest Census this Month | 5 | 6 | 4 | 5 | 5 | 6 | 6 | 3 | 6 | 11 | 11 | 11 | 10 | 9 | 6 | 3 | 6 | 11 | 11 | 11 | 11 | 11 | 11 | 11 | 11 | 10 | 9 | 9 | |
| Over/Under for Total Planned Beds | UNDER | UNDER | UNDER | UNDER | UNDER | UNDER | UNDER | UNDER | UNDER | OVER | OVER | OVER | OVER | OVER | UNDER | UNDER | UNDER | UNDER | UNDER | UNDER | OVER | OVER | OVER | OVER | OVER | OVER | OVER | OVER | |
| GMPCC | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Total Level I Beds | - | - | - | - | - | - | - | - | - | - | - | - | - | - | - | - | - | - | - | - | - | - | - | - | - | - | - | - | |
| Average Daily Census | - | - | - | - | - | - | - | - | - | - | - | - | - | - | - | - | - | - | - | - | - | - | - | - | - | - | - | - | |
| Total Admissions during Month | - | - | - | - | - | - | - | - | - | - | - | - | - | - | - | - | - | - | - | - | - | - | - | - | - | - | - | - | |
| Level 1 Admissions to Non-L1 Units | - | - | - | - | - | - | - | - | - | - | - | - | - | - | - | - | - | - | - | - | - | - | - | - | - | - | - | - | |
| Total Level 1 Discharges this Month | - | - | - | - | - | - | - | - | - | - | - | - | - | - | - | - | - | - | - | - | - | - | - | - | - | - | - | - | |
| Highest Census this Month | - | - | - | - | - | - | - | - | - | - | - | - | - | - | - | - | - | - | - | - | - | - | - | - | - | - | - | - | |
| Over/Under for Total Planned Beds | - | - | - | - | - | - | - | - | - | - | - | - | - | - | - | - | - | - | - | - | - | - | - | - | - | - | - | - | |
| FAHC | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Total Level I Beds | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | |
| Average Daily Census | 1 | 1 | 1 | 4 | 3 | 4 | 6 | 6 | 6 | 6 | 6 | 9 | 7 | 8 | 6 | 6 | 6 | 6 | 6 | 6 | 6 | 6 | 6 | 6 | 6 | 7 | 8 | 8 | |
| Total Admissions during Month | 0 | 0 | 0 | 7 | 3 | 3 | 5 | 4 | 5 | 9 | 5 | 2 | 6 | 6 | 5 | 4 | 5 | 9 | 9 | 5 | 2 | 2 | 6 | 6 | 6 | 6 | 6 | | |
| Level 1 Admissions to Non-L1 Units | - | - | - | - | - | - | - | - | - | - | - | - | - | - | - | - | - | - | - | - | - | - | - | - | - | - | - | | |
| Total Level 1 Discharges this Month | 0 | 0 | 0 | 4 | 4 | 1 | 3 | 6 | 5 | 6 | 3 | 4 | 6 | 5 | 3 | 6 | 5 | 6 | 6 | 3 | 4 | 6 | 6 | 6 | 6 | 6 | 6 | | |
| Highest Census this Month | 1 | 1 | 1 | 5 | 4 | 4 | 8 | 8 | 8 | 8 | 11 | 10 | 8 | 9 | 8 | 8 | 8 | 8 | 8 | 11 | 10 | 10 | 10 | 10 | 8 | 8 | 9 | | |
| Over/Under for Total Planned Beds | UNDER | UNDER | UNDER | UNDER | UNDER | UNDER | UNDER | UNDER | UNDER | UNDER | OVER | OVER | OVER | OVER | UNDER | UNDER | UNDER | UNDER | UNDER | UNDER | OVER | OVER | OVER | OVER | OVER | OVER | OVER | OVER | |

Analysis is based on the Inpatient Tracking Spreadsheet maintained by the Department of Vermont Health Access (DVHA). Includes psychiatric hospitalizations with Level 1 Designations for hospitalizations occurring at adult inpatient psychiatric units. Level 1 designation is reserved for patients with risk of imminent harm to self or others and requiring significant resources. Over/Under for Total Planned Beds is computed using the difference between total level 1 beds and average daily census for each hospital and statewide. Unit of admission is available from June 2013 onw ar.c.

**Legislative Report to Mental Health Oversight Committee and Health Care Oversight Committee
Level 1 Inpatient Utilization: Statewide Condensed Report**

| | 2012 | | | | | | | | | | | | 2013 | | | | | | | | | | | |
|-----------------------------------|-------|-------|-------|-------|-------|-------|-------|-------|-------|------|------|------|------|------|-------|-------|-------|------|------|------|------|------|------|--|
| | Jul | Aug | Sep | Oct | Nov | Dec | Jan | Feb | Mar | Apr | May | Jun | Jul | Aug | Jan | Feb | Mar | Apr | May | Jun | Jul | Aug | | |
| SYSTEM TOTAL | | | | | | | | | | | | | | | | | | | | | | | | |
| Total Level I Beds | 27 | 27 | 27 | 27 | 27 | 27 | 35 | 35 | 35 | 35 | 35 | 35 | 35 | 35 | 35 | 35 | 35 | 35 | 35 | 35 | 35 | 35 | 35 | |
| Average Daily Census | 15 | 19 | 23 | 25 | 24 | 24 | 29 | 29 | 32 | 37 | 45 | 44 | 38 | 39 | 29 | 29 | 32 | 37 | 45 | 44 | 38 | 38 | 39 | |
| Over/Under for Total Planned Beds | UNDER | UNDER | UNDER | UNDER | UNDER | UNDER | UNDER | UNDER | UNDER | OVER | OVER | OVER | OVER | OVER | UNDER | UNDER | UNDER | OVER | OVER | OVER | OVER | OVER | OVER | |
| Wait Times for Beds | | | | | | | | | | | | | | | | | | | | | | | | |
| Average # People Waiting per Day | 1 | 1.1 | 1.4 | 1.8 | 1.1 | 0.8 | 0.8 | 1.5 | 1.4 | 2 | 1.7 | 1.4 | 2.4 | 4 | 0.8 | 1.5 | 1.4 | 2 | 1.7 | 1.4 | 2.4 | 8 | 4 | |
| Average Wait Times in Days | 1 | 1.1 | 1.4 | 1.8 | 1.1 | 0.8 | 0.8 | 1.5 | 1.4 | 2 | 1.7 | 1.4 | 2.4 | 4 | 0.8 | 1.5 | 1.4 | 2 | 1.7 | 1.4 | 2.4 | 8 | 4 | |

Analysis is based on the Inpatient Tracking Spreadsheet maintained by the Department of Vermont Health Access (DVHA). Includes psychiatric hospitalizations with Level 1 Designations for hospitalizations occurring at adult inpatient psychiatric units. Level 1 designation is reserved for patients with risk of imminent harm to self or others and requiring significant resources. 'Over/Under for Total Planned Beds' is computed using the difference between total level 1 beds and average daily census for each hospital and statewide. Average number of people waiting per day is determined using the morning inpatient update and wait times in days are based upon data maintained by the GMPCC admissions department that is submitted by crisis, designated agency, and hospital screeners.

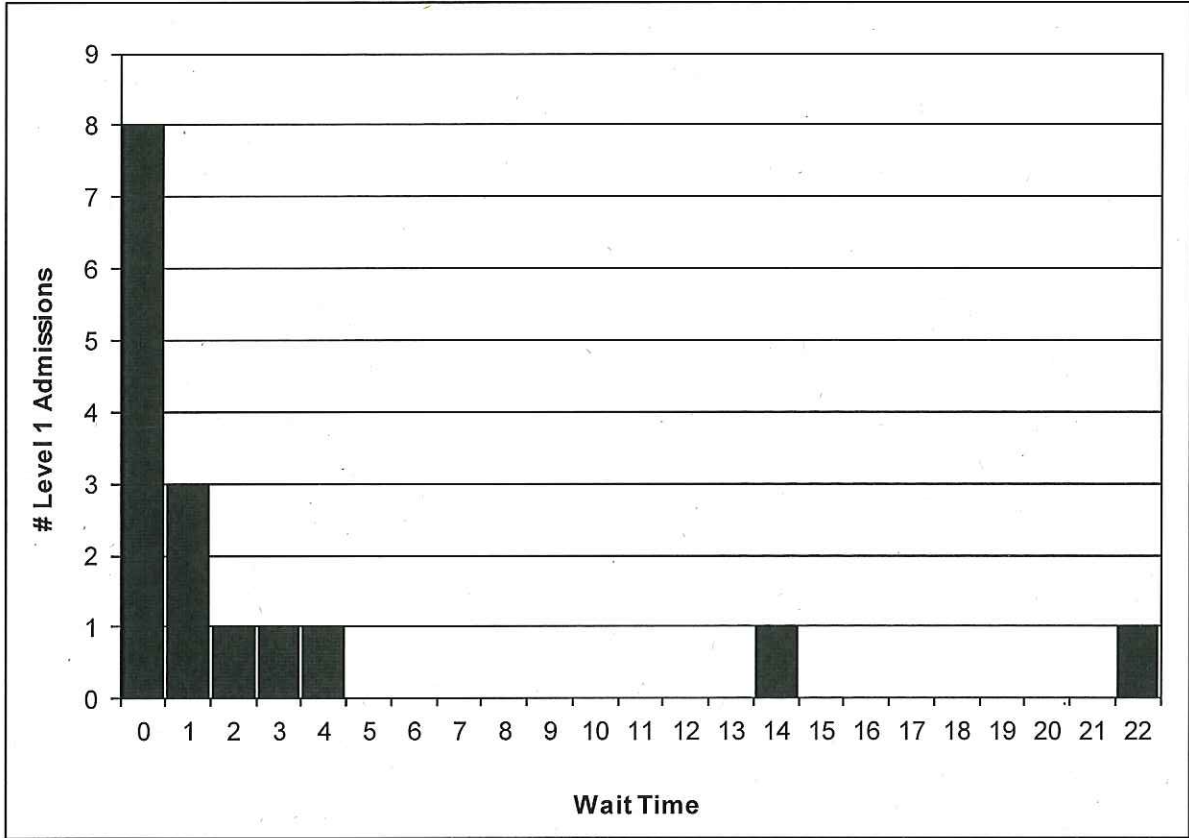
- (2) The number of individuals waiting for admission to a level 1 psychiatric inpatient unit after the determination of need for admission to emergency departments, correctional facilities, ~~or any other identified settings~~ is made and the number of days individuals are waiting.

A. Graph: Wait Times to Admission for Level I patients.

This graph includes data on individuals waiting in both emergency departments and correctional facilities. The graph shows that of the 16 Level I admissions who were waiting in August, half of them were admitted in less than 24 hours. The remaining 8 individuals waited differing lengths of time. Six individuals waited in emergency departments – three for one day and one each for two, three, and four days during the month. There were two individuals who waited 14 and 22 days, respectively, in a correctional facility. The average number of Level I patients waiting for beds each day over the past 5 months is closer to 5.

Legislative Report to Mental Health Oversight Committee and Health Care Oversight Committee

Wait Times to Admission for Level 1 Patients August 2013



| Wait Time | Level 1 Admissions | |
|--------------|--------------------|-------------|
| | # | % |
| < 1 day | 8 | 50% |
| 1 day | 3 | 19% |
| 2 days | 1 | 6% |
| 3 days | 1 | 6% |
| 4 days | 1 | 6% |
| 14 days | 1 | 6% |
| 22 days | 1 | 6% |
| Total | 16 | 100% |

Analysis is based on the Inpatient Tracking Spreadsheet maintained by the Department of Vermont Health Access (DVHA) and wait time reported to DMH GMPCC Admissions Unit. Includes psychiatric hospitalizations with Level 1 designations for hospitalizations occurring at adult inpatient psychiatric units. Level 1 designation is reserved for patients with risk of imminent harm to self or others and requiring significant resources. Average number of people waiting per day is determined using the morning inpatient update and wait times in days are based upon data maintained by the GMPCC admissions department that is submitted by crisis, designated agency, and hospital screeners.

- (3) The total census capacity and average daily census of new intensive recovery residence beds opened in accordance with 2012 Acts and Resolves No. 79

**Legislative Report to Mental Health Oversight Committee
and Health Care Oversight Committee
Intensive Residential Census Report
June - August 2013**

Adult Intensive Residential Facilities

| | Hilltop | Meadowview | Second Spring | Second Spring North | Middlesex | State Avg | State Avg Excluding Middlesex |
|---------------------|---------|------------|---------------|---------------------|-----------|-----------|-------------------------------|
| June | | | | | | | |
| Total Beds | 8 | 6 | 22 | | 7 | 43 | 36 |
| Monthly Avg. | 7.00 | 6.00 | 21.40 | | 2.00 | 34.13 | 33.53 |
| Monthly % Occupancy | 87.5% | 100.0% | 97.3% | | 28.6% | 79.4% | 93.1% |
| July | | | | | | | |
| Total Beds | 8 | 6 | 22 | | 7 | 43 | 36 |
| Monthly Avg. | 7.83 | 5.42 | 21.71 | | 2.71 | 37.42 | 34.71 |
| Monthly % Occupancy | 97.9% | 90.3% | 98.7% | | 38.7% | 87.0% | 96.4% |
| August | | | | | | | |
| Total Beds | 8 | 6 | 20 | 8 | 7 | 49 | 42 |
| Monthly Avg. | 7.97 | 4.58 | 21.19 | 1.00 | 4.97 | 39.13 | 34.16 |
| Monthly % Occupancy | 99.6% | 76.3% | 99.8% | 12.5% | 71.0% | 86.2% | 89.1% |

Based on data reported to the Vermont Department of Mental Health (DMH) by intensive recovery residence beds for adult care using the electronic bed boards system. Programs are expected to report to electronic bed boards a minimum of once per day to update their residential census.

Middlesex Therapeutic Community Residence began accepting placements on June 20th, 2013 and began reporting to electronic bed boards system on June 21, 2013. Second Spring had 22 beds for intensive residential recovery until August 20, 2013, when two beds were reallocated for crisis services. Second Spring North opened on August 19, 2013.

The system added 6 additional placements in August with the opening of Second Spring North. That residence is expected to be at capacity within the month of September. Second Spring transferred 2 of their residential beds to use as crisis beds, and 8 new beds came on line at Second Spring North.

Designated Agency Crisis Beds Census Report for FY 13 (not all data was available)

| Crisis Bed/DA | Period of LOS | Average LOS days | Period of LOS |
|------------------------|----------------------|---------------------------------|----------------------|
| CSAC Cottage Crisis | 8/1-8/31 | 9.5 | August, 2013 |
| Alyssum | 8/1-8/31 | 13 | August, 2013 |
| CMC Chris' Place | 8/1-8/31 | 10 | August, 2013 |
| HCRS Alternatives | 8/1-8/31 | Not available at time of report | |
| LCMH Oasis | 8/1-8/31 | 7 | August, 2013 |
| NCSS Bayview | 8/1-8/31 | 3.64 | August, 2013 |
| NKHS Care Bed | 8/1-8/31 | 4.43 | August, 2013 |
| RMH CSID | 8/1-8/31 | 17.75 | August, 2013 |
| Second Spring (2) | 8/1-8/31 | N/A | August, 2013 |
| UCS Battelle House | 8/1-8/31 | Not available at time of report | August, 2013 |
| WCMH Home Intervention | 8/1-8/31 | 11 | August, 2013 |

II. Additional Reports as requested, separate from MHOC mandatory reporting.

Appendix 1:

Adult Inpatient Utilization and Bed Closures: Page 1 of 2

2013

| | Jan | Feb | Mar | Apr | May | Jun | Jul | Aug |
|------------------------------|-----|-----|-----|------|------|------|------|------|
| ADULT INPATIENT UNITS | | | | | | | | |
| Total Beds | 147 | 147 | 147 | 162 | 157 | 157 | 157 | 157 |
| Average Daily Census | 137 | 137 | 137 | 134 | 135 | 146 | 138 | 139 |
| Percent Occupancy | 93% | 93% | 93% | 83% | 86% | 93% | 88% | 90% |
| # Days at Occupancy | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 |
| # Days with Closed Beds | 26 | 26 | 26 | 30 | 30 | 29 | 31 | 31 |
| Average # of Closed Beds | 2 | 2 | 2 | 3 | 2 | 4 | 6 | 6 |
| GMPCC | | | | | | | | |
| Total Beds | 8 | 8 | 8 | 8 | 8 | 8 | 8 | 8 |
| Average Daily Census | 6 | 6 | 6 | 8 | 8 | 8 | 8 | 7 |
| Percent Occupancy | 74% | 74% | 74% | 100% | 100% | 96% | 100% | 89% |
| # Days at Occupancy | 7 | 7 | 7 | 30 | 31 | 21 | 31 | 10 |
| # Days with Closed Beds | 14 | 14 | 14 | 0 | 0 | 0 | 0 | 23 |
| Average # of Closed Beds | 2 | 2 | 2 | - | - | - | - | 1 |
| BR TYLER 4 | | | | | | | | |
| Total Beds | 13 | 13 | 13 | 14 | 14 | 14 | 14 | 14 |
| Average Daily Census | 13 | 13 | 13 | 13 | 14 | 14 | 14 | 14 |
| Percent Occupancy | 97% | 97% | 97% | 94% | 100% | 100% | 100% | 100% |
| # Days at Occupancy | 22 | 22 | 22 | 17 | 26 | 30 | 29 | 30 |
| # Days with Closed Beds | 0 | 0 | 0 | 10 | 0 | 0 | 0 | 0 |
| Average # of Closed Beds | - | - | - | 1 | - | - | - | - |
| RRMC SOUTH WING | | | | | | | | |
| Total Beds | | | | 6 | 6 | 6 | 6 | 6 |
| Average Daily Census | | | | 6 | 6 | 6 | 6 | 6 |
| Percent Occupancy | | | | 100% | 99% | 98% | 100% | 97% |
| # Days at Occupancy | | | | 9 | 30 | 27 | 31 | 25 |
| # Days with Closed Beds | | | | 0 | 1 | 0 | 0 | 2 |
| Average # of Closed Beds | | | | - | 1 | - | - | 1 |

Based on data reported to the Vermont Department of Mental Health (DMH) by designated hospitals (DH) for adult inpatient care using the electronic bed boards system. Beds at inpatient settings can be closed based on the clinical decision of the director of each inpatient unit.

Adult Inpatient Utilization and Bed Closures: Page 2 of 2

2013

■ All Units

■ Level 1 Units

■ Non-Level 1 Adult Units

Jan Feb Mar Apr May Jun Jul Aug

ADULT INPATIENT UNITS

| | | | | | | | | |
|--------------------------|-----|-----|-----|-----|-----|-----|-----|-----|
| Total Beds | 147 | 147 | 147 | 162 | 157 | 157 | 157 | 157 |
| Average Daily Census | 137 | 137 | 137 | 134 | 135 | 146 | 138 | 139 |
| Percent Occupancy | 93% | 93% | 93% | 83% | 86% | 93% | 88% | 90% |
| # Days at Occupancy | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 |
| # Days with Closed Beds | 26 | 26 | 26 | 30 | 30 | 29 | 31 | 31 |
| Average # of Closed Beds | 2 | 2 | 2 | 3 | 2 | 4 | 6 | 6 |

CVMC

| | | | | | | | | |
|--------------------------|-----|-----|-----|-----|-----|-----|-----|-----|
| Total Beds | 14 | 14 | 14 | 14 | 14 | 14 | 14 | 14 |
| Average Daily Census | 13 | 13 | 13 | 13 | 13 | 13 | 11 | 12 |
| Percent Occupancy | 92% | 92% | 92% | 93% | 93% | 91% | 82% | 88% |
| # Days at Occupancy | 16 | 16 | 16 | 12 | 11 | 13 | 5 | 10 |
| # Days with Closed Beds | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 |
| Average # of Closed Beds | - | - | - | - | - | - | - | - |

FAHC

| | | | | | | | | |
|--------------------------|-----|-----|-----|-----|-----|-----|-----|-----|
| Total Beds | 27 | 27 | 27 | 27 | 27 | 27 | 27 | 27 |
| Average Daily Census | 26 | 26 | 26 | 23 | 25 | 26 | 25 | 24 |
| Percent Occupancy | 98% | 98% | 98% | 86% | 93% | 96% | 94% | 90% |
| # Days at Occupancy | 19 | 19 | 19 | 0 | 9 | 15 | 5 | 0 |
| # Days with Closed Beds | 8 | 8 | 8 | 22 | 14 | 3 | 21 | 28 |
| Average # of Closed Beds | 2 | 2 | 2 | 2 | 2 | 1 | 1 | 2 |

BR (NON LEVEL 1 UNITS)

| | | | | | | | | |
|--------------------------|-----|-----|-----|-----|-----|-----|-----|-----|
| Total Beds | 59 | 59 | 59 | 61 | 61 | 61 | 61 | 61 |
| Average Daily Census | 55 | 55 | 55 | 57 | 57 | 58 | 54 | 54 |
| Percent Occupancy | 94% | 94% | 94% | 94% | 93% | 95% | 88% | 89% |
| # Days at Occupancy | 1 | 1 | 1 | 2 | 0 | 2 | 0 | 2 |
| # Days with Closed Beds | 18 | 18 | 18 | 15 | 28 | 14 | 29 | 22 |
| Average # of Closed Beds | 1 | 1 | 1 | 2 | 1 | 3 | 3 | 3 |

RRMC GEN PSYCH

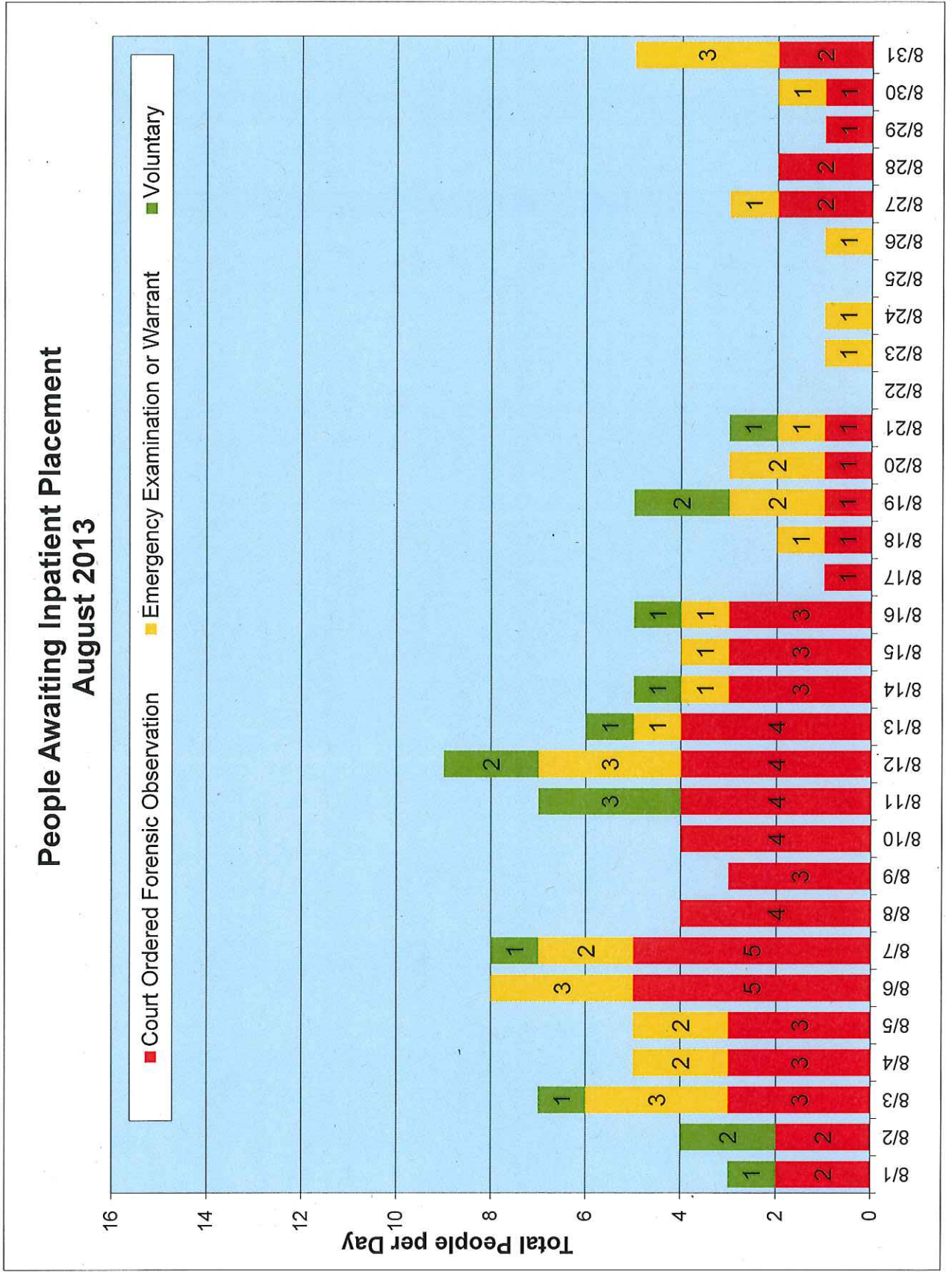
| | | | | | | | | |
|--------------------------|-----|-----|-----|-----|-----|-----|-----|-----|
| Total Beds | 16 | 16 | 16 | 22 | 17 | 17 | 17 | 17 |
| Average Daily Census | 16 | 16 | 16 | 17 | 15 | 14 | 14 | 15 |
| Percent Occupancy | 98% | 98% | 98% | 77% | 87% | 82% | 84% | 87% |
| # Days at Occupancy | 24 | 24 | 24 | 5 | 16 | 2 | 0 | 4 |
| # Days with Closed Beds | 0 | 0 | 0 | 2 | 1 | 27 | 26 | 17 |
| Average # of Closed Beds | - | - | - | 4 | 1 | 2 | 2 | 2 |

WC

| | | | | | | | | |
|--------------------------|-----|-----|-----|-----|-----|-----|-----|-----|
| Total Beds | 10 | 10 | 10 | 10 | 10 | 10 | 10 | 10 |
| Average Daily Census | 9 | 9 | 9 | 9 | 7 | 8 | 8 | 8 |
| Percent Occupancy | 85% | 85% | 85% | 91% | 71% | 82% | 79% | 81% |
| # Days at Occupancy | 12 | 12 | 12 | 10 | 2 | 7 | 7 | 7 |
| # Days with Closed Beds | 2 | 2 | 2 | 0 | 4 | 3 | 4 | 1 |
| Average # of Closed Beds | 2 | 2 | 2 | - | 2 | 1 | 3 | 1 |

Based on data reported to the Vermont Department of Mental Health (DMH) by designated hospitals (DH) for adult inpatient care using the electronic bed boards system. Beds at inpatient settings can be closed based on the clinical decision of the director of each inpatient unit.

Appendix 2:



Appendix 3:



Vermont Department of Mental Health System Snapshot (September 11, 2013)

*data forthcoming

2013

| Reporting Category | FY13 Q3 | | | FY13 Q4 | | | FY14 Q1 | | | FY14 Q2 | | |
|---|-----------|-----------|-----------|-----------|--------------|-----------|-----------|-----------|-----|---------|-----|-----|
| | Jan | Feb | Mar | Apr | May | Jun | Jul | Aug | Sep | Oct | Nov | Dec |
| Adult Inpatient Hospital | | | | | | | | | | | | |
| % Occupancy | 94% | 91% | 92% | 84% | 87% | 93% | 88% | 89% | | | | |
| Avg. Daily Census | 137 | 132 | 136 | 134 | 135 | 146 | 138 | 139 | | | | |
| % Occupancy at No Refusal Units | | | | | | | 100% | 96% | | | | |
| Avg. Daily Census | | | | | | | 28 | 27 | | | | |
| Adult Crisis Beds | | | | | | | | | | | | |
| % Occupancy | 74% | 73% | 79% | 82% | 83% | 84% | 84% | 80% | | | | |
| Avg. Daily Census | 28 | 28 | 29 | 29 | 31 | 31 | 31 | 31 | | | | |
| Applications for Involuntary Hospitalizations (EE) | | | | | | | | | | | | |
| Children | - | - | - | 9 | 10 | 6 | 9 | 7 | | | | |
| Adults | 50 | 32 | 55 | 41 | 55 | 39 | 65 | 32 | | | | |
| Total adults admitted with CRT | 13 | 13 | 27 | 19 | 14 | 11 | 15 | 12 | | | | |
| Designation (% of Total applications) | 26% | 41% | 49% | 46% | 25% | 28% | 23% | 38% | | | | |
| Total Level 1 Admissions | 22 | 13 | 20 | 22 | 26 | 10 | 19 | 16 | | | | |
| Instances when Placement Unavailable & Adult Client Held in ED | | | | | | | | | | | | |
| | 27 | 21 | 43 | 27 | 38 | 24 | 38 | 16 | | | | |
| Adult Involuntary Medications | | | | | | | | | | | | |
| # Applications | 2 | 3 | 3 | 2 | 9 | 4 | 5 | 7 | | | | |
| # Granted Orders | 2 | 3 | 2 | 2 | 5 | 3 | 5 | 3 | | | | |
| Mean time to decision (days) | 22 | 12 | 20 | 27 | 19 | 17 | 14 | 11 | | | | |
| Court Ordered Forensic Observation Screenings | | | | | | | | | | | | |
| # Requested | 11 | 13 | 9 | 10 | 11 | 11 | 22 | 20 | | | | |
| # Inpatient Ordered | 3 | 7 | 5 | 5 | 6 | 6 | 11 | 8 | | | | |
| VT Resident Suicides | | | | | | | | | | | | |
| Youth (0-17) | | | | | | | | | | | | |
| Total | 0 | 0 | 0 | 0 | 0 | 2 | 0 | * | | | | |
| # with DA contact within previous year | - | - | - | - | - | 1 | - | * | | | | |
| Adults (18+) | | | | | | | | | | | | |
| Total | 4 | 6 | 10 | 8 | 10 | 4 | 5 | * | | | | |
| # with DA contact within previous year | 0 | 3 | 2 | 2 | 1 | 0 | 1 | * | | | | |
| Housing | | | | | | | | | | | | |
| # Clients permanently housed as a result of new Act79 housing funding | 18 | 21 | 14 | 11 | 14 | 5 | 0 | 5 | | | | |
| Total # enrolled to date | 98 | 119 | 133 | 144 | 158 | 169 | 169 | 176 | | | | |
| Involuntary Transportation | | | | | | | | | | | | |
| Adults (total transports) | | | | | | | | | | | | |
| # of Transports | 19 | 17 | 18 | 11 | 18 | 13 | 18 | * | | | | |
| % Non-Secure | 58% | 94% | 61% | 82% | 78% | 85% | 72% | * | | | | |
| % Secure | 42% | 6% | 39% | 18% | 22% | 15% | 28% | * | | | | |
| % all transports using metal restraints | 16% | 6% | 6% | 9% | 6% | 8% | 17% | * | | | | |
| % all transports using soft restraints | 26% | 0% | 33% | 9% | 17% | 8% | 11% | * | | | | |
| Children Under 10 (total transports) | | | | | | | | | | | | |
| # of Transports | 3 | 3 | 0 | 0 | 0 | 0 | 0 | * | | | | |
| % Non-Secure | 100% | 100% | - | - | - | - | - | * | | | | |
| % Secure | 0% | 0% | - | - | - | - | - | * | | | | |
| % all transports using metal restraints | 0% | 0% | - | - | - | - | - | * | | | | |
| % all transports using soft restraints | 0% | 0% | - | - | - | - | - | * | | | | |
| CRT Employment | | | | | | | | | | | | |
| % Employed | | 15% | | | available | | | | | | | |
| Wages per employed client | | \$2,318 | | | October 2013 | | | | | | | |



Vermont Department of Mental Health System Snapshot (September 11, 2013)

| Reporting Category | 2012 (PRIOR YEAR) | | | | | | | | | | | |
|---|-------------------|-----|-----|---------|-----|-----|---------|------|-----|---------|------|------|
| | FY12 Q3 | | | FY12 Q4 | | | FY13 Q1 | | | FY13 Q2 | | |
| | Jan | Feb | Mar | Apr | May | Jun | Jul | Aug | Sep | Oct | Nov | Dec |
| Adult Inpatient Hospital | | | | | | | | | | | | |
| % Occupancy | - | - | - | 89% | 92% | 90% | 89% | 89% | 91% | 91% | 88% | 89% |
| Avg. Daily Census | - | - | - | - | - | - | - | - | - | - | - | - |
| Adult Crisis Beds | | | | | | | | | | | | |
| % Occupancy | - | - | - | 72% | 80% | 80% | 77% | 75% | 72% | 78% | 82% | 86% |
| Avg. Daily Census | - | - | - | - | - | - | - | - | - | - | - | - |
| Applications for Involuntary Hospitalizations (EE) | | | | | | | | | | | | |
| Children | - | - | - | - | - | - | - | - | - | - | - | - |
| Adults | - | - | - | 28 | 45 | 32 | 43 | 40 | 43 | 44 | 39 | 32 |
| Total adults admitted with Level 1 | - | - | - | - | - | - | 13 | 11 | 10 | 17 | 11 | 13 |
| Designation (% of Total applications) | - | - | - | - | - | - | 30% | 28% | 23% | 39% | 28% | 41% |
| Total adults admitted with CRT | - | - | - | 7 | 15 | 18 | 18 | 11 | 24 | 22 | 14 | 11 |
| Designation (% of Total applications) | - | - | - | 25% | 33% | 56% | 42% | 28% | 56% | 50% | 36% | 34% |
| Instances when Placement Unavailable & Client Held in ED | | | | | | | | | | | | |
| Involuntary Medications | | | | | | | | | | | | |
| # Applications | 4 | 3 | 7 | 3 | 6 | 4 | 4 | 3 | 4 | 6 | 0 | 2 |
| # Granted Orders | 3 | 2 | 5 | 2 | 1 | 3 | 4 | 2 | 1 | 6 | - | 2 |
| Mean time to decision (days) | 20 | 16 | 19 | 15 | 22 | 20 | 11 | 15 | 14 | 13 | - | 11 |
| Forensic Screenings | | | | | | | | | | | | |
| # Requested | - | - | - | - | - | - | 17 | 19 | 11 | 8 | 8 | 14 |
| # Inpatient Ordered | - | - | - | - | - | - | 4 | 6 | 4 | 5 | 6 | 9 |
| VT Resident Suicides | | | | | | | | | | | | |
| Youth (0-17) | | | | | | | | | | | | |
| Total | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 1 | 1 | 0 | 0 | 0 |
| # with DA contact within previous year | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 |
| Adults (18+) | | | | | | | | | | | | |
| Total | 7 | 6 | 11 | 8 | 9 | 7 | 6 | 4 | 7 | 4 | 3 | 9 |
| # with DA contact within previous year | 2 | 1 | 2 | 3 | 1 | 2 | 2 | 1 | 1 | 1 | 0 | 3 |
| Housing | | | | | | | | | | | | |
| # Clients permanently housed as a result of new Act99 housing funding | - | - | - | 5 | 10 | 6 | 18 | 20 | 13 | 8 | 0 | |
| Involuntary Transportation | | | | | | | | | | | | |
| Adults (total transports) | | | | | | | | | | | | |
| # of Transports | 24 | 14 | 19 | 11 | 23 | 15 | 14 | 13 | 17 | 8 | 15 | 15 |
| % Non-Secure | 33% | 36% | 11% | 27% | 22% | 47% | 57% | 46% | 35% | 38% | 67% | 47% |
| % Secure | 67% | 57% | 89% | 73% | 74% | 40% | 43% | 54% | 65% | 63% | 33% | 53% |
| % Metal | 46% | 50% | 63% | 73% | 48% | 20% | 21% | 31% | 35% | 13% | 20% | 27% |
| % Soft | 21% | 7% | 26% | 0% | 26% | 20% | 21% | 23% | 29% | 50% | 13% | 27% |
| Children Under 10 (total transports) | | | | | | | | | | | | |
| # of Transports | - | - | - | - | - | - | 5 | 1 | 0 | 2 | 1 | 1 |
| % Non-Secure | - | - | - | - | - | - | 80% | 100% | - | 100% | 0% | 100% |
| % Secure | - | - | - | - | - | - | 20% | 0% | - | 0% | 100% | 0% |
| % Metal | - | - | - | - | - | - | 0 | 0 | 0 | 0 | 1 | 0 |
| % Soft | - | - | - | - | - | - | 1 | 0 | 0 | 0 | 0 | 0 |
| CRT Employment | | | | | | | | | | | | |
| % Employed | 14% | | | 15% | | | 15% | | | 16% | | |
| Wages per employed client | \$2,308 | | | \$2,363 | | | \$2,379 | | | \$2,486 | | |



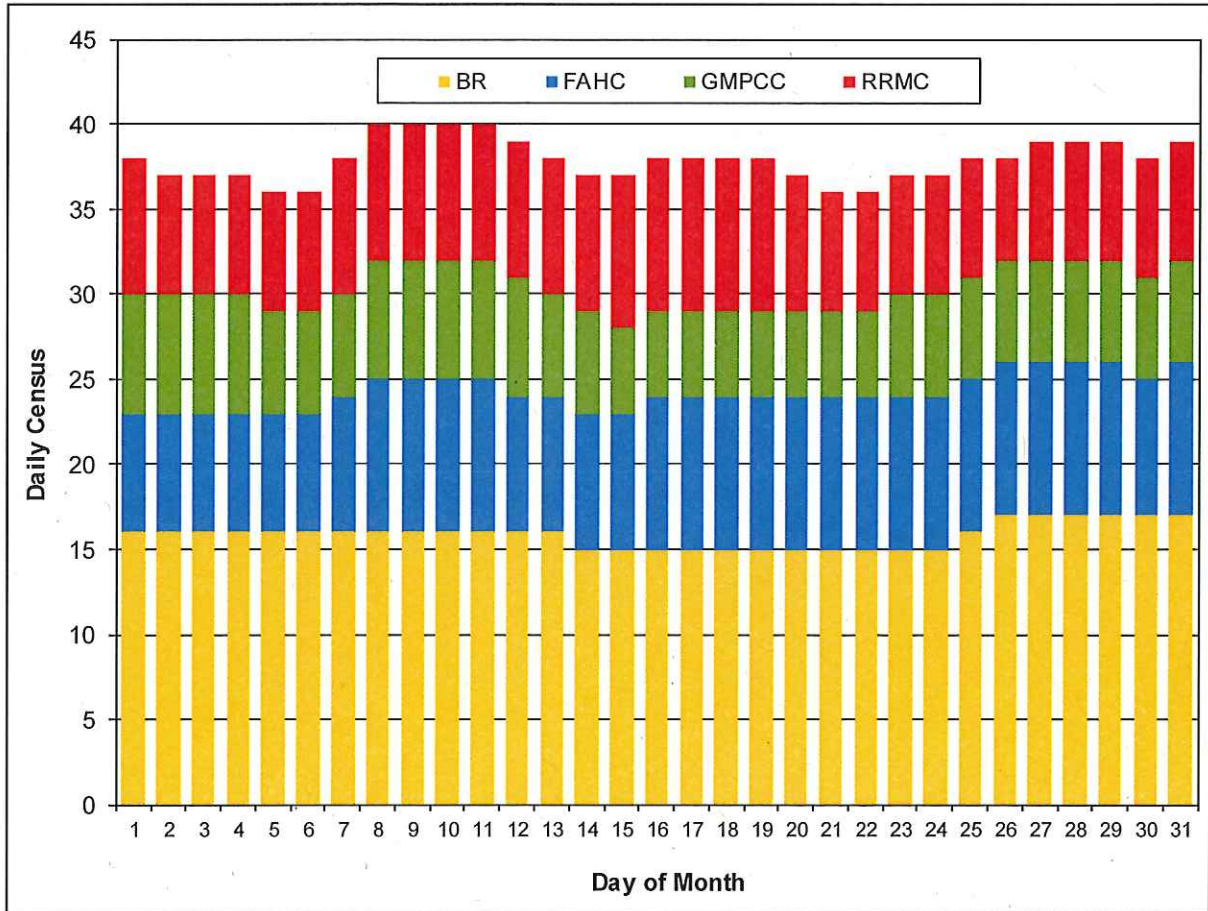
Vermont Department of Mental Health System Snapshot (September 11, 2013)

Definitions

| | |
|--|--|
| Inpatient Hospital | The hospitals designated by the Commissioner of Mental Health for involuntary psychiatric treatment: Brattleboro Retreat (BR), Central Vermont Medical Center (CVMC), Fletcher Allen Health Center (FAHC), Rutland Regional Medical Center (RRMC), Windham Center at Springfield Hospital (WC), and Green Mountain Psychiatric Care Center (GMPCC). Adult Inpatient Units at GMPCC, RRMC - South Wing, and Brattleboro Retreat - Tyler 4. The units designated as no refusal units: BR - Tyler 4, RRMC - South Wing, GMPCC. |
| Designated Agency Crisis Bed | Emergency Services beds intended to provide crisis intervention, respite, or hospital diversion that are staffed by and under the supervision of a designated community mental health agency (DA). Prior to May 2013, census is measured from the average census reported per day for each crisis bed unit. Going forward, census will be measured from the highest census reported per day for each crisis bed unit. |
| Court-ordered Forensic Observations | Forensic patients are designated when there is criminal justice involvement and when there are questions concerning competency/sanity of an individual being arraigned. A screening is requested by a community mental health agency pursuant to §4815 13 VSA. Numbers represent a point in time count mid-month. |
| Emergency Examination (EE) | An application for emergency examination has been completed for involuntarily admission (§7508 of 18 VSA) to a designated hospital for psychiatric treatment (danger to self or others) subsequent to an evaluation by community mental health agency screener & medical doctor. |
| Secure Transport | Transport via law enforcement utilizing either metal or soft restraints. |
| Non-Secure Transport | Transport not utilizing restraints; this can include plain clothed law enforcement, DA transport teams, or other means of transport such as family members. |
| VT Resident Suicides | Based on <u>PRELIMINARY</u> data from the Vital Statistics System maintained by Vermont Department of Health and Monthly Service Report (MSR) data provided by the Department of Mental Health (DMH). Cross-sector data analysis was conducted using LinkPlus, a probabilistic statistical linkage software developed by the CDC for linking records across databases. MSR data includes services provided by community designated agencies for clients served by DAs within the year prior to death. Primary Program is defined as the primary program assignment on the client's last service with DMH. Monthly counts are subject to change as more information is made |
| Housing | Based on the number of applications approved, in the months the program has been operating and the total approved to date. Enrollment to date numbers do not necessarily sum to total numbers housed. Data cleaning is on-going. |

Appendix 4:

**Level 1 Stays by Inpatient Hospital
August 2013**



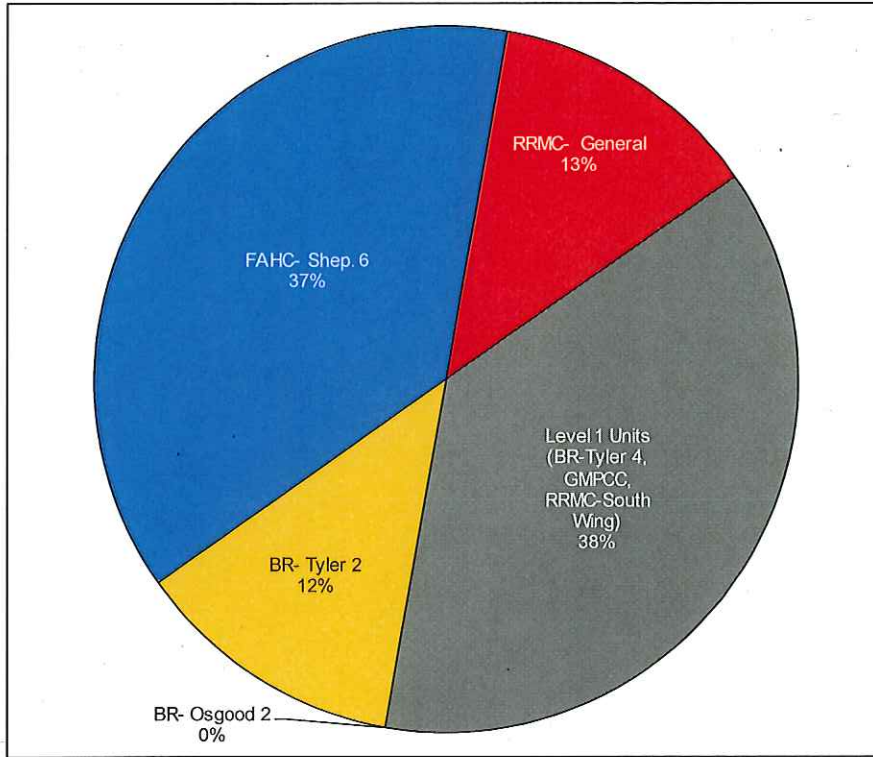
Level 1 Stays during August 2013

| Hospital | Total Adult Beds | Total Stays | Highest Daily Census | Average Daily Census |
|---------------------|------------------|-------------|----------------------|----------------------|
| Brattleboro Retreat | 75 | 20 | 17 | 16 |
| Fletcher Allen | 27 | 13 | 9 | 8 |
| Green Mountain | 8 | 9 | 7 | 6 |
| Rutland Regional | 23 | 13 | 9 | 8 |
| Statewide | | 55 | 40 | 38 |

Date of Report: September 9, 2013.

Analysis is based on the Inpatient Tracking Spreadsheet maintained by the Department of Vermont Health Access (DVHA). Includes psychiatric hospitalizations with Level 1 designations for hospitalizations occurring at the Brattleboro Retreat (BR), Fletcher Allen Medical Center (FAHC), Rutland Regional Medical Center (RRMC), and Green Mountain Psychiatric Care Center (GMPCC). Level 1 designation is reserved for patients with risk of imminent harm to self or others and requiring significant resources. Total stays reflects admissions and existing designated level 1 hospitalizations on unit during a specified month.

Level 1 Admissions by Psychiatric Inpatient Unit August 2013



| Psychiatric Inpatient Unit | Total Admissions |
|----------------------------|------------------|
| * BR- Osgood 2 | 0 |
| * BR- Tyler 2 | 2 |
| * FAHC- Shep. 6 | 6 |
| * RRMC- General | 2 |
| BR- Tyler 4 | 1 |
| RRMC- South Wing | 3 |
| GMPCC | 2 |
| Total | 16 |

* Units specifically requested by MHOC.

Episodes based upon the unit at admission to inpatient care.
Patients can be transferred to other units within the hospital.

Date of Report: September 9, 2013.

Analysis is based on the Inpatient Tracking Spreadsheet maintained by the Department of Vermont Health Access (DVHA). Includes psychiatric hospitalizations with Level 1 designations for hospitalizations occurring at the Brattleboro Retreat (BR), Fletcher Allen Medical Center (FAHC), Rutland Regional Medical Center (RRMC), and Green Mountain Psychiatric Care Center (GMPCC). Level 1 designation is reserved for patients with risk of imminent harm to self or others and requiring significant resources.

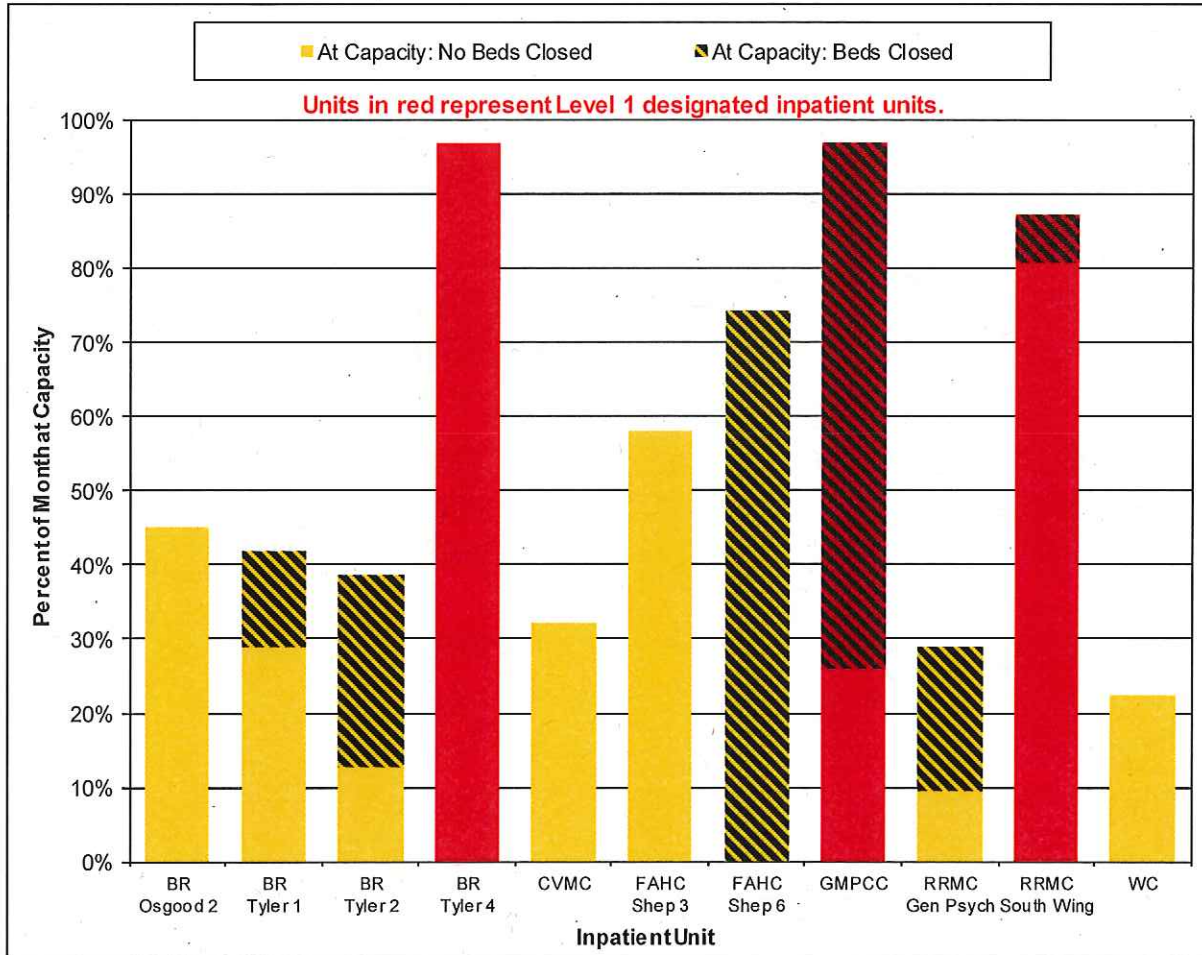
Level 1 Inpatient Care Length of Stay for Current Patients

| Hospital | # Patients | Length of Stay in Days As of September 6, 2013 | | | |
|------------------|------------|---|------------|-----------|-----------|
| | | Minimum | Maximum | Mean | Median |
| BR | 19 | 3 | 331 | 107 | 105 |
| FAHC | 9 | 6 | 122 | 41 | 31 |
| GMPCC | 6 | 14 | 233 | 72 | 42 |
| RRMC | 8 | 3 | 150 | 67 | 66 |
| Statewide | 42 | 3 | 331 | 80 | 56 |

Analysis is based on the Inpatient Tracking Spreadsheet maintained by the Department of Vermont Health Access (DVHA). Includes psychiatric hospitalizations with Level 1 designations for hospitalizations occurring at the Brattleboro Retreat (BR), Fletcher Allen Medical Center (FAHC), Rutland Regional Medical Center (RRMC), and Green Mountain Psychiatric Care Center (GMPCC). Level 1 designation is reserved for patients with risk of imminent harm to self or others and requiring significant resources. Length of Stay is calculated from admission to date of report for clients still in inpatient care.

Appendix 5:

Designated Hospital Inpatient Capacity August 2013

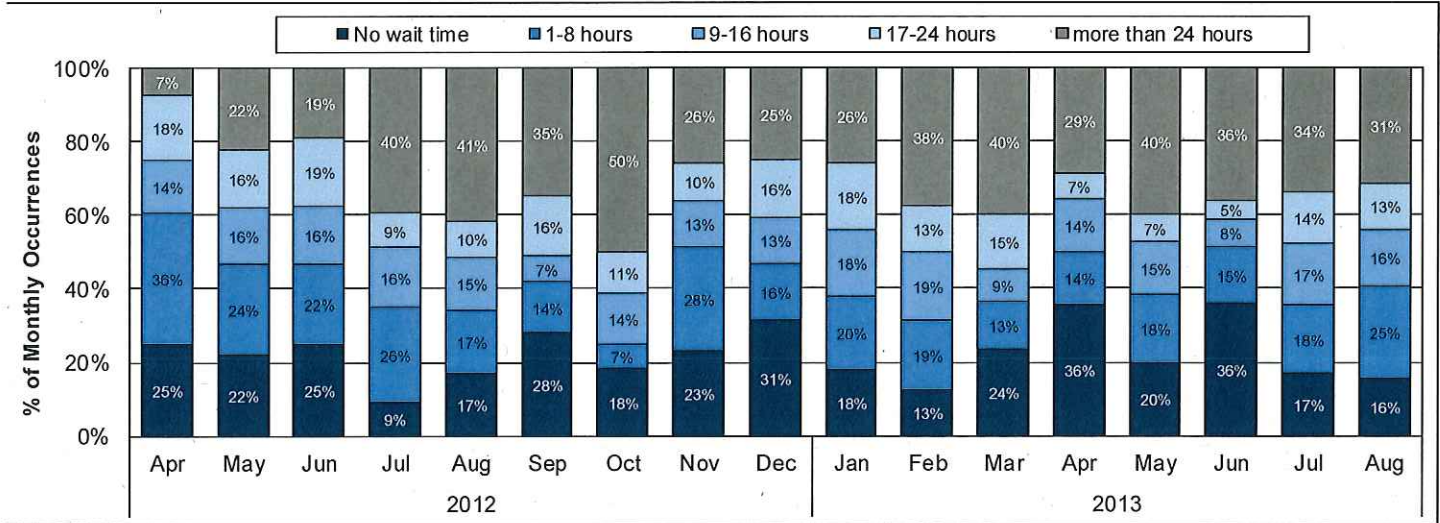


| Designated Hospital | Not At Capacity | At Capacity | | No Census Reported |
|------------------------------------|-----------------|----------------|-------------|--------------------|
| | | No Beds Closed | Beds Closed | |
| Brattleboro Retreat - Osgood 2 | 55% | 45% | 0% | 0% |
| Brattleboro Retreat - Tyler 1 | 58% | 29% | 13% | 0% |
| Brattleboro Retreat - Tyler 2 | 61% | 13% | 26% | 0% |
| Brattleboro Retreat - Tyler 4 | 3% | 97% | 0% | 0% |
| Center Vermont Medical Center | 65% | 32% | 0% | 3% |
| Fletcher Allen - Shepardson 3 | 39% | 58% | 0% | 3% |
| Fletcher Allen - Shepardson 6 | 23% | 0% | 74% | 3% |
| Green Mtn. Psychiatric Care Center | 3% | 26% | 71% | 0% |
| Rutland Regional - General Psych | 71% | 10% | 19% | 0% |
| Rutland Regional - South Wing* | 13% | 81% | 6% | 0% |
| Windham Center | 74% | 23% | 0% | 3% |

Based on data reported to the Vermont Department of Mental Health (DMH) by designated hospitals (DH) for adult inpatient care using the electronic bed boards system. Beds at inpatient settings can be closed based on the clinical decision of the director of each inpatient unit.

Appendix 6:

Emergency Exams and Warrants
Wait Times in Hours for Involuntary Inpatient Admission
April 2012 - August 2013



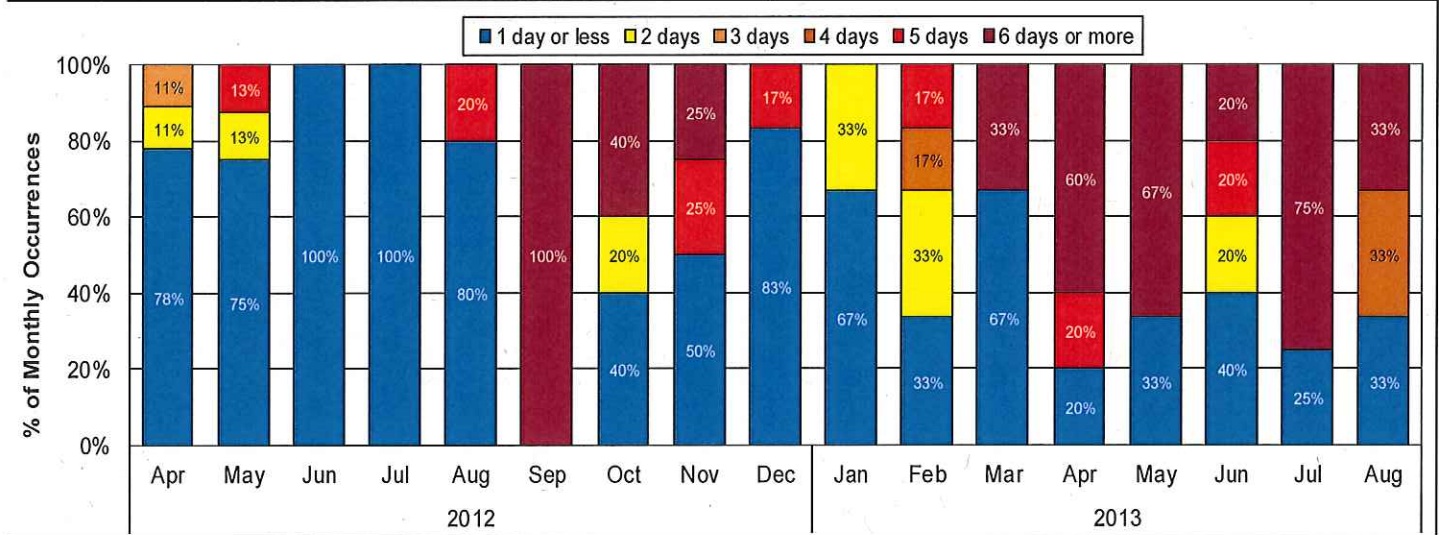
| Wait Time | 2012 | | | | | | | | 2013 | | | | | | | | |
|---------------------------|-----------|-----------|-----------|-----------|-----------|-----------|-----------|-----------|-----------|-----------|-----------|-----------|-----------|-----------|-----------|-----------|-----------|
| | Apr | May | Jun | Jul | Aug | Sep | Oct | Nov | Dec | Jan | Feb | Mar | Apr | May | Jun | Jul | Aug |
| No wait time | 7 | 10 | 8 | 4 | 7 | 12 | 8 | 9 | 10 | 9 | 4 | 13 | 15 | 11 | 14 | 11 | 5 |
| 1-8 hours | 10 | 11 | 7 | 11 | 7 | 6 | 3 | 11 | 5 | 10 | 6 | 7 | 6 | 10 | 6 | 12 | 8 |
| 9-16 hours | 4 | 7 | 5 | 7 | 6 | 3 | 6 | 5 | 4 | 9 | 6 | 5 | 6 | 8 | 3 | 11 | 5 |
| 17-24 hours | 5 | 7 | 6 | 4 | 4 | 7 | 5 | 4 | 5 | 9 | 4 | 8 | 3 | 4 | 2 | 9 | 4 |
| more than 24 hours | 2 | 10 | 6 | 17 | 17 | 15 | 22 | 10 | 8 | 13 | 12 | 22 | 12 | 22 | 14 | 22 | 10 |
| Total | 28 | 45 | 32 | 43 | 41 | 43 | 44 | 39 | 32 | 50 | 32 | 55 | 42 | 55 | 39 | 65 | 32 |
| Wait Time in Hours | | | | | | | | | | | | | | | | | |
| Mean | 10.7 | 18.2 | 13.6 | 23.9 | 27.2 | 22.4 | 36.3 | 18.5 | 18.2 | 19.2 | 33.4 | 29.4 | 25.8 | 37.1 | 28.8 | 35.0 | 21.9 |
| Median | 5.9 | 10.5 | 9.1 | 15.0 | 18.1 | 16.3 | 24.1 | 7.7 | 9.8 | 12.5 | 15.7 | 18.3 | 7.6 | 13.8 | 5.7 | 15.4 | 11.8 |

Analysis conducted by the Vermont Department of Mental Health Research & Statistics Unit.

Analysis based on data maintained by the GMFCC admissions department that is collected from paperwork submitted by crisis and designated agency/hospital screeners. Wait times are defined from determination of need to admission to disposition, less time for medical clearance, for persons on warrant for immediate examination (code 12) and application for emergency exam (code 11). Wait times are point in time and are categorized based on month of service, not month of disposition, for clients who have a

Appendix 7:

Court Ordered Forensic Observations
Wait Times in Days for Involuntary Inpatient Admission
April 2012 - August 2013



| Wait Time | 2012 | | | | | | | | | | 2013 | | | | | | |
|--------------------------|----------|----------|----------|----------|----------|----------|----------|----------|----------|----------|----------|----------|----------|----------|----------|----------|----------|
| | Apr | May | Jun | Jul | Aug | Sep | Oct | Nov | Dec | Jan | Feb | Mar | Apr | May | Jun | Jul | Aug |
| 1 day or less | 7 | 6 | 3 | 2 | 4 | 0 | 2 | 2 | 5 | 2 | 2 | 2 | 1 | 1 | 2 | 2 | 1 |
| 2 days | 1 | 1 | 0 | 0 | 0 | 0 | 1 | 0 | 0 | 1 | 2 | 0 | 0 | 0 | 1 | 0 | 0 |
| 3 days | 1 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 |
| 4 days | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 1 | 0 | 0 | 0 | 0 | 0 | 1 |
| 5 days | 0 | 1 | 0 | 0 | 1 | 0 | 0 | 1 | 1 | 0 | 1 | 0 | 1 | 0 | 1 | 0 | 0 |
| 6 days or more | 0 | 0 | 0 | 0 | 0 | 3 | 2 | 1 | 0 | 0 | 0 | 1 | 3 | 2 | 1 | 6 | 1 |
| Total | 9 | 8 | 3 | 2 | 5 | 3 | 5 | 4 | 6 | 3 | 6 | 3 | 5 | 3 | 5 | 8 | 3 |
| Wait Time in Days | | | | | | | | | | | | | | | | | |
| Mean | 0.8 | 0.9 | 0.3 | 0.0 | 1.2 | 7.3 | 3.8 | 4.5 | 1.2 | 0.7 | 2.3 | 3.7 | 9.4 | 5.0 | 3.4 | 11.7 | 3.9 |
| Median | 0.0 | 0.0 | 0.0 | 0.0 | 0.0 | 7.0 | 2.0 | 2.5 | 0.5 | 0.0 | 2.0 | 0.8 | 9.5 | 5.7 | 1.4 | 11.6 | 3.4 |

Analysis conducted by the Vermont Department of Mental Health Research & Statistics Unit.

Analysis based on data maintained by the GMPC admissions department that is collected from paperwork submitted by crisis and designated agency/hospital screeners. Wait times are defined from determination of need to admission to disposition, less time for medical clearance, for persons on court ordered forensic observation (code 30). Wait times are point in time and are categorized based on month of service, not month of disposition, for clients who have a disposition.