

VAHHS is collecting point-in-time data on patients stuck in emergency departments waiting transfer or discharge to mental health care—also called patient boarding. This data collection effort is a work in progress and may change over time as we refine data points or streamline collection efforts. This point-in-time data is collated and shared with the Department of Mental Health, hospital representatives, and other interested parties.

The VAHHS data collection process is described below:

FREQUENCY— Hospitals report manually to VAHHS on patients awaiting placement as of each Monday and Thursday morning.

SCOPE— The scope of this report includes all patients waiting for mental health care in Vermont emergency rooms. Data are collected on all patients waiting, regardless of legal status or insurance.

STRUCTURE— Hospitals report person-level data to VAHHS for comparison with DMH counts. Person-level records include age, legal status, Medicaid status, and reason for wait so data discrepancies with DMH can be identified easier.

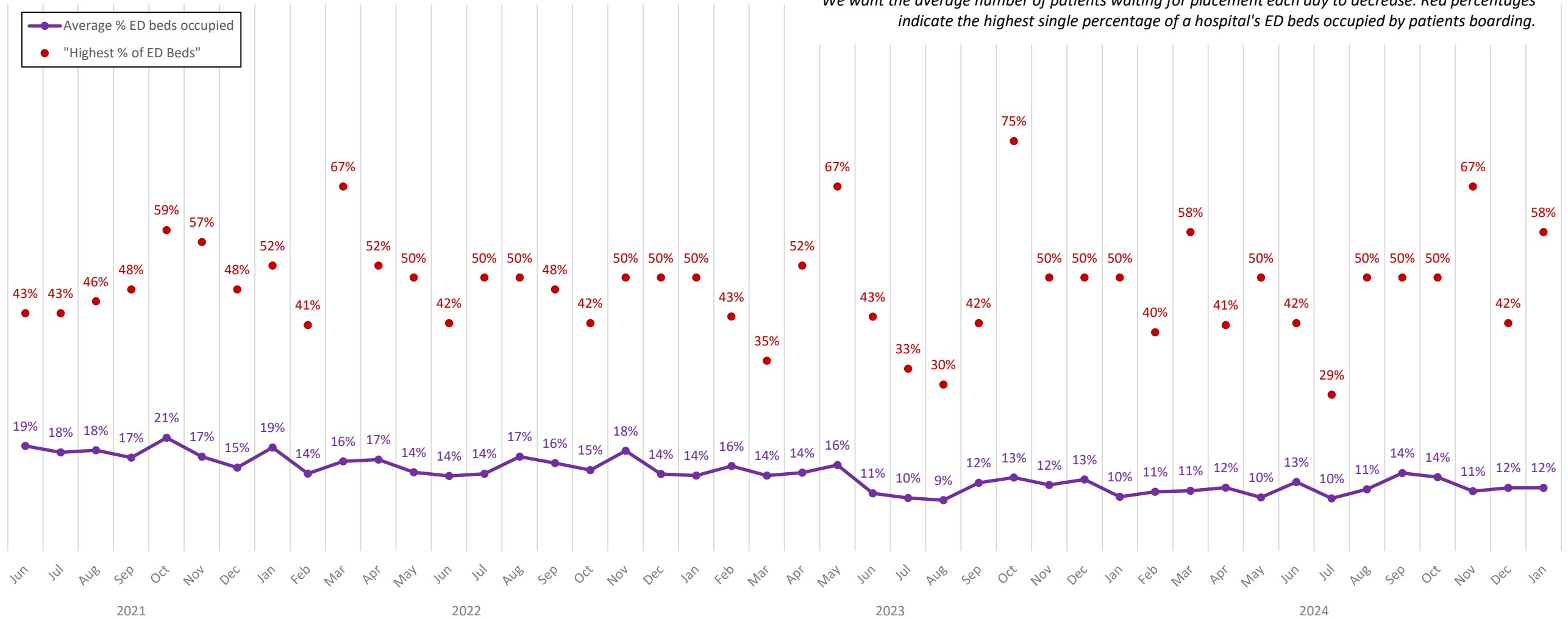
COMPARISON

WITH DMH – The scope of data that VAHHS is collecting is more expansive than the data reported to DMH, as VAHHS is collecting data on all patients regardless of legal status and reason for waiting. Data differences in DMH counts and VAHHS counts of patients waiting are driven by voluntary patients and/or patients waiting for community placements not being reported to DMH.

Notes on Monthly Summary Table:

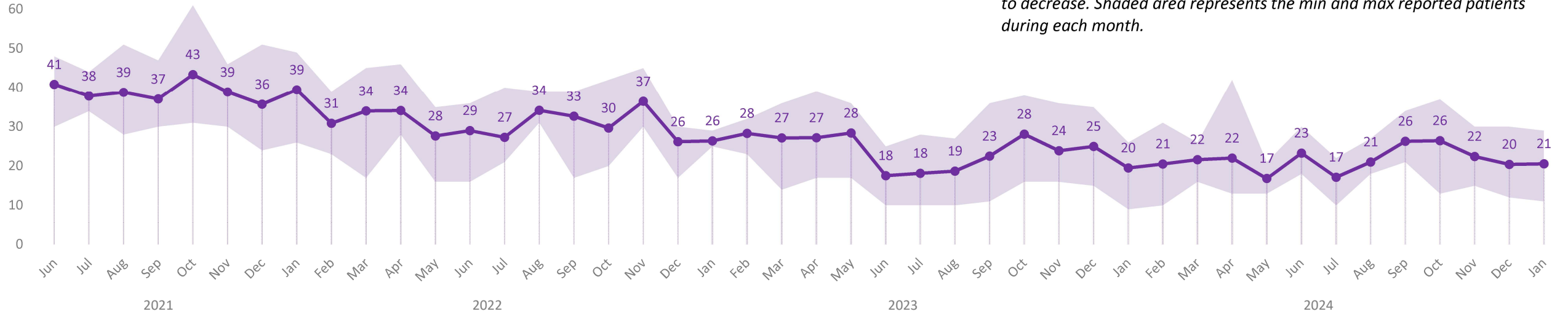
Data excludes days where reporting from hospitals fell below 70% or days where the University of Vermont Medical Center was not able to make a report. Figures are point-in-time and cannot be summed together to arrive at a total number of individuals or episodes. Averages represent averages of daily reports in each month. Most patients waiting for care are in the emergency department, however a small number of hospitals place patients on medical surgical floors while waiting transfer to inpatient psychiatric units. These patients are included in our numbers as they are still boarding.

ED Mental Health Boarding Impact Average % of ED Beds Occupied

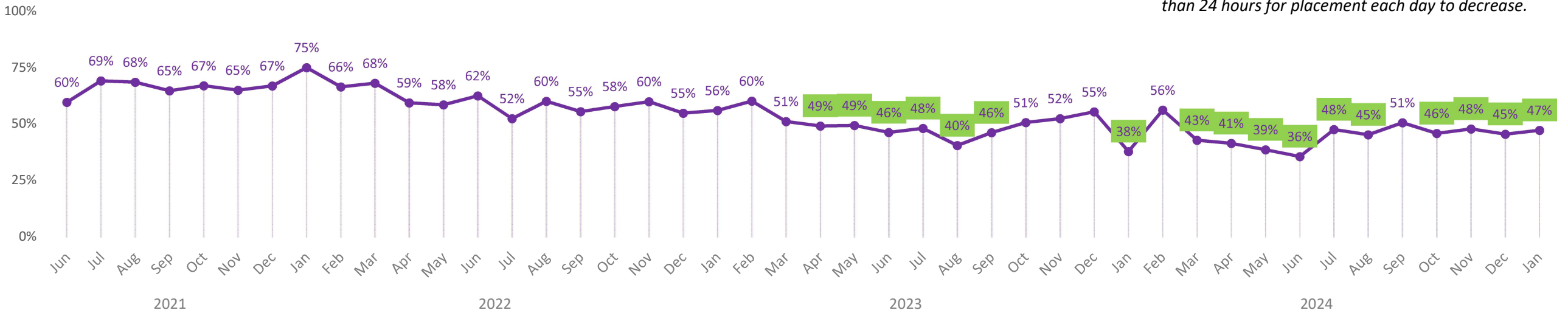


ED OCCUPANCY MEASURES – % ED beds occupied represents the total number of all ED beds in Vermont hospitals currently occupied by a patient waiting for mental health placement. **Highest % at an ED** represents the highest percentage of a single hospital's ED beds occupied by patients waiting for mental health placement. Total ED beds used as a denominator for these measures represent dedicated ED rooms. However, during times of high-volume hospitals may expand ED treatment space into adjacent departments and hallway spaces which are not included in the denominator for this measure.

Average Total Mental Health Patients Boarding per Day

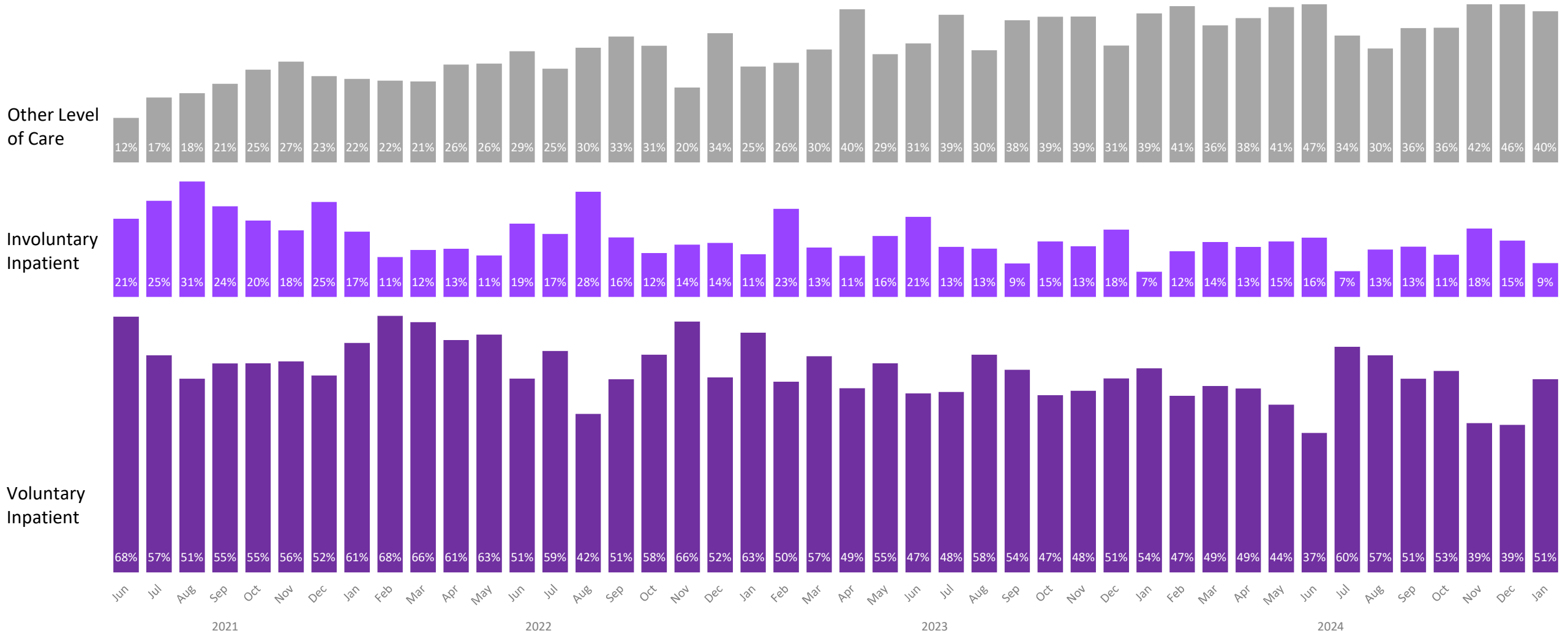


Average Percent of Mental Health Patients Waiting More Than 24 Hours



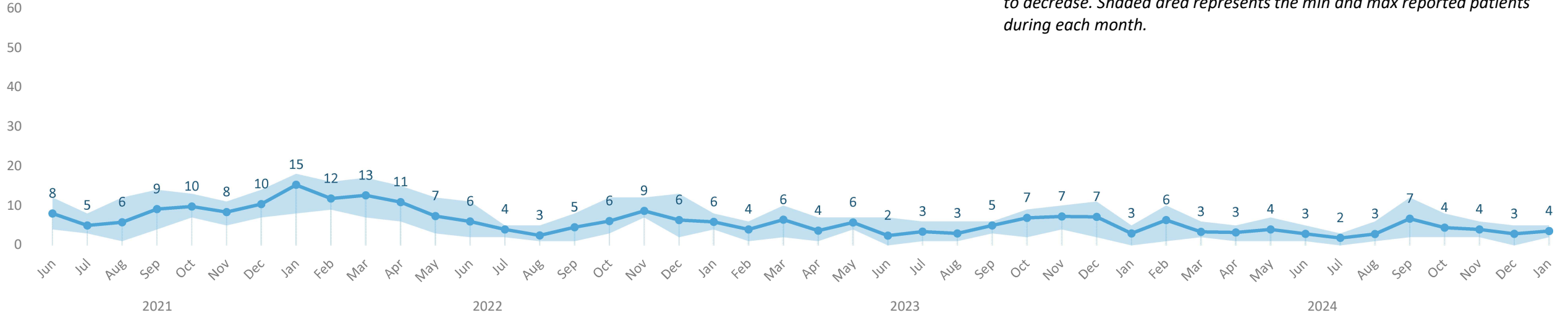
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**Mental Health Patients Waiting for Placement
Level of Care Needed
Average Percentages Each Month**

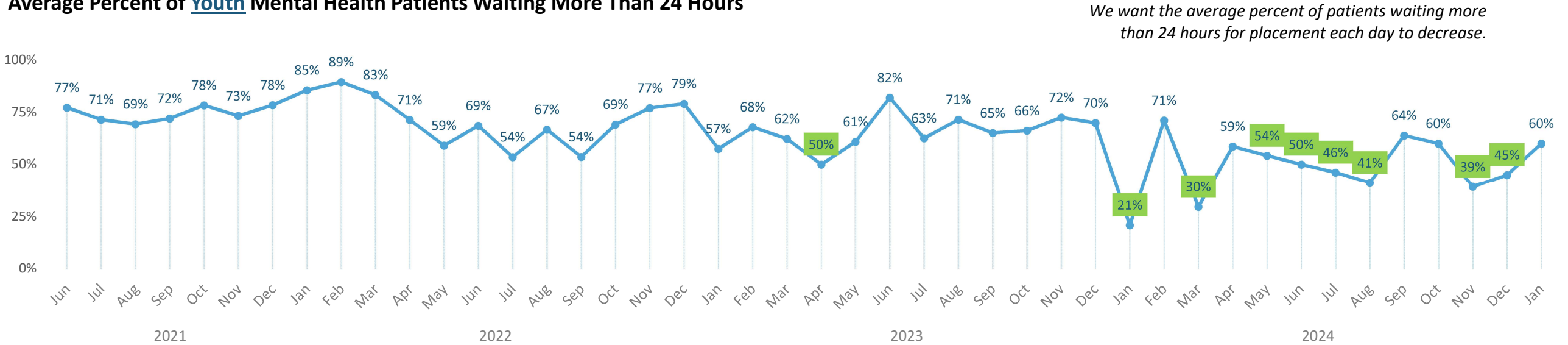


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Average Youth Mental Health Patients Boarding per Day

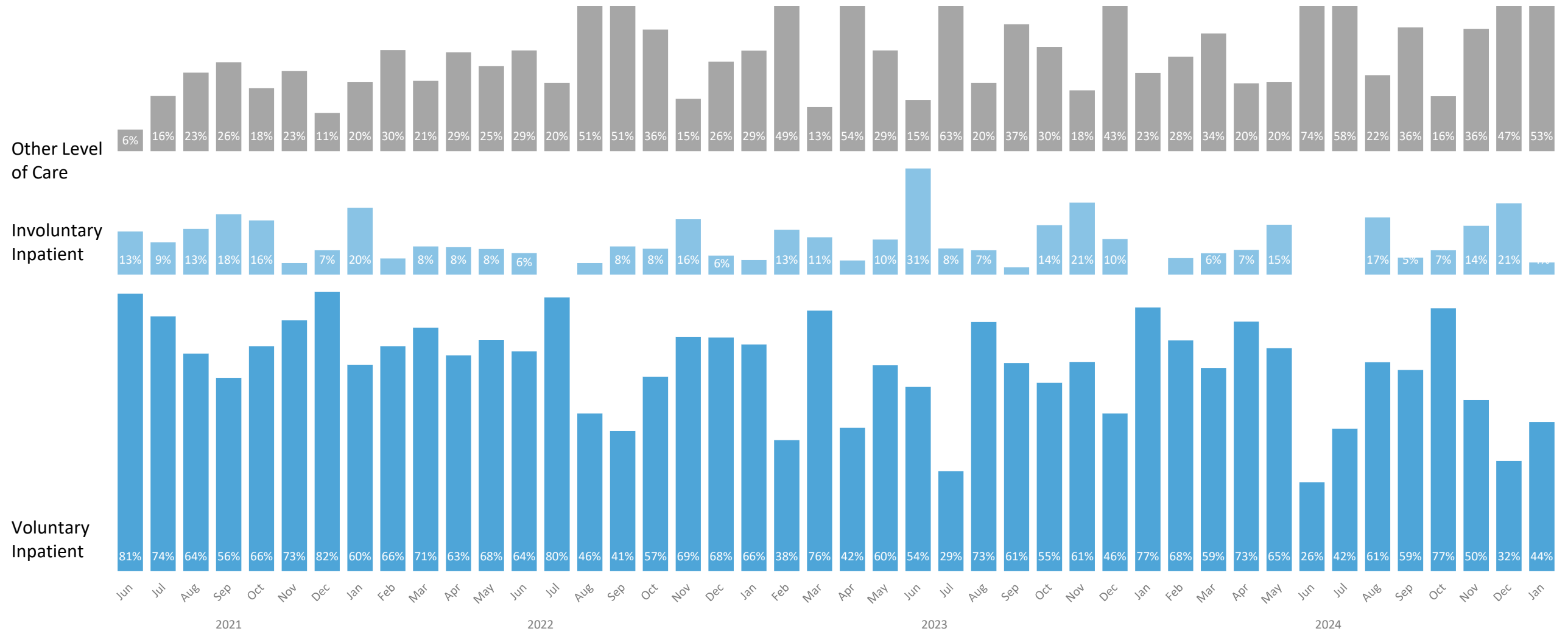


Average Percent of Youth Mental Health Patients Waiting More Than 24 Hours



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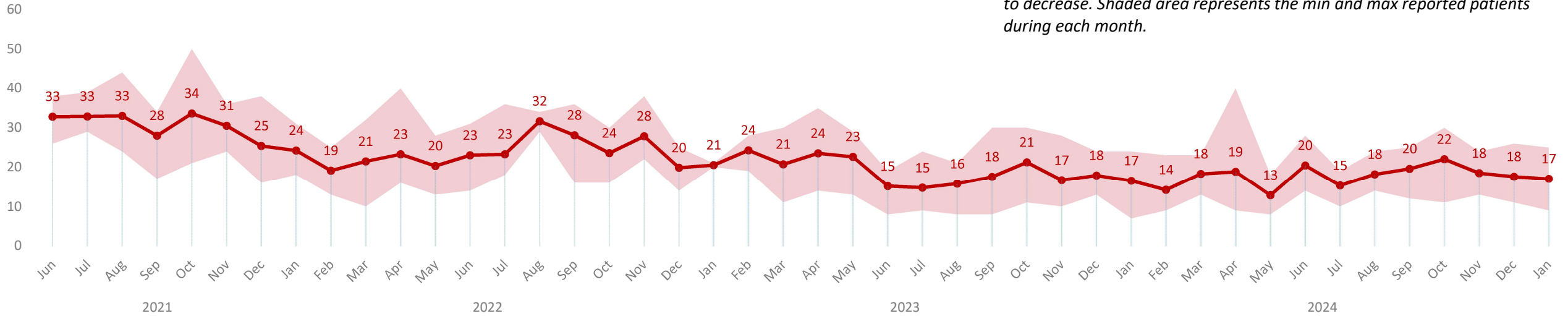
Youth Mental Health Patients Waiting for Placement
Level of Care Needed
Average Percentages Each Month



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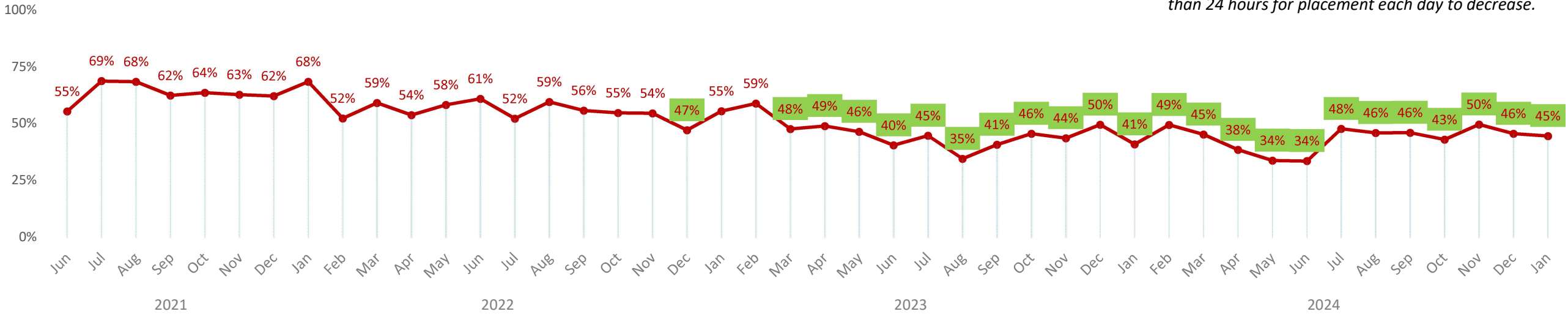
Average Adult Mental Health Patients Boarding per Day

We want the average number of patients waiting for placement each day to decrease. Shaded area represents the min and max reported patients during each month.



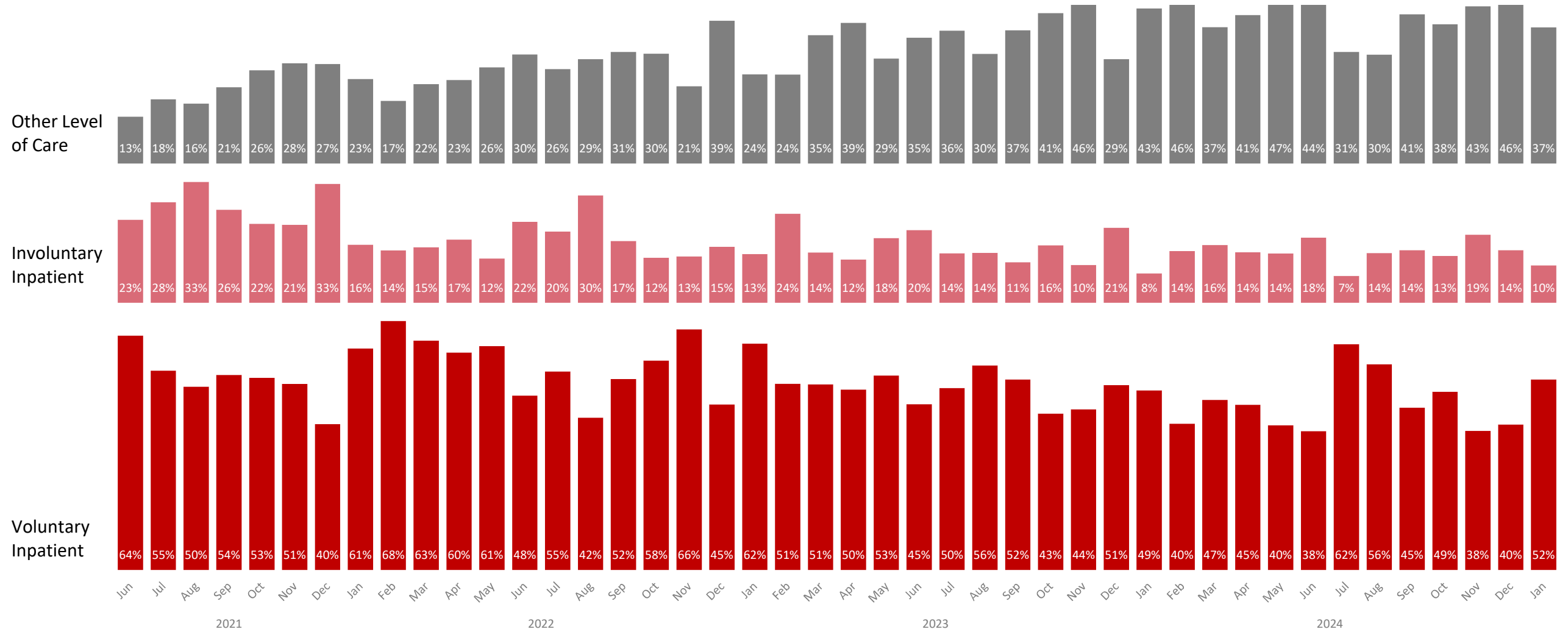
Average Percent of Adult Mental Health Patients Waiting More Than 24 Hours

We want the average percent of patients waiting more than 24 hours for placement each day to decrease.



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Adult Mental Health Patients Waiting for Placement
Level of Care Needed
Average Percentages Each Month



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