

**Vermont Mental Health Performance Indicator Project**  
Agency of Human Services, Department of Health, Division of Mental Health  
108 Cherry Street, Burlington, Vermont 05401

TO: Vermont Mental Health Performance Indicator Project  
Advisory Group and Interested Parties

FROM: John Pandiani and Olivia Kobel

DATE: June 9, 2006

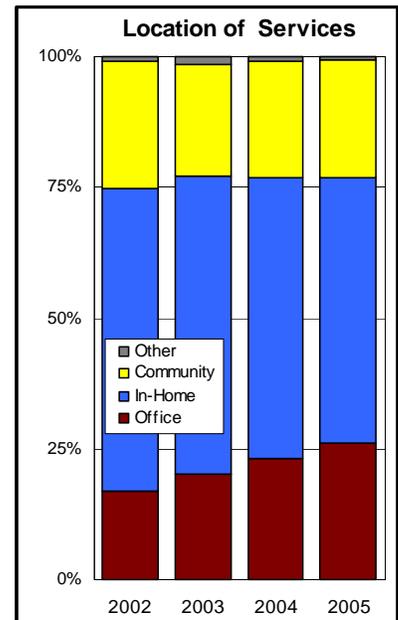
RE: Location of Eldercare Services FY2002-2005

This week's brief PIP report provides an overview of the locations of service which were reported by Vermont's eight CMHC Eldercare Programs during FY2002-2005. The analysis is based on the Monthly Service Report data submitted to the Division of Mental Health by designated community agencies and includes all adults aged 60 years and older served by Eldercare Programs. Location of Eldercare services is one of the areas being monitored by the Division of Mental Health as part of the Health Department Asset Management Inventory process.

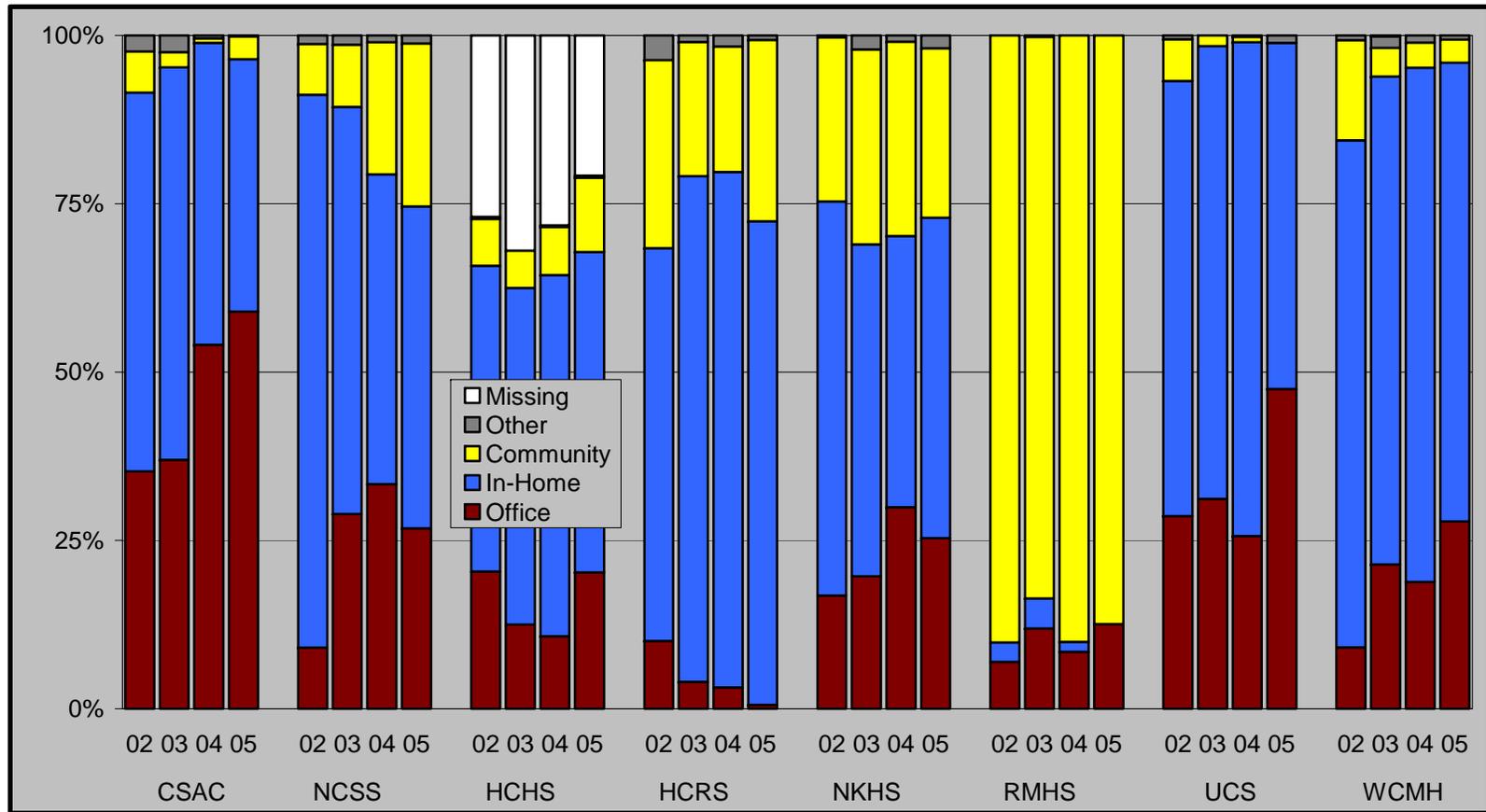
As you will see, there was substantial variation among local programs in the location of Eldercare services and there were changes in the location of services over time. Overall, services reported as being provided "In-home" (including Nursing Homes) were the most common, accounting for more than half of all services, during each of the four years. The volume of "Office" based Eldercare services experienced the greatest change, increasing from 17% in 2002 to 26% in 2005. During this period, "Community" based services accounted for between 22% and 24% of all services, "Other" services accounted for only 1%, and "Missing" data accounted for between 3% and 6% of all reported services.

During FY2005, Addison County (CSAC) reported the greatest proportion of Eldercare services as occurring in "Office" settings (59%) and Southeastern Vermont (HCRS) reported the smallest proportion of Eldercare services occurring in "Office" settings (1%). HCRS and Washington County (WCMH) reported the most "In-home" services (72% and 68% respectively). Rutland (RMHS) reported the most services in "Community" settings (87%). The Howard Center (HCHS) had the largest proportion of service records with no location of service reported (26%).

These data raise important questions about potential differences among providers in local policies and coding conventions with regard to location of service. We look forward to your comments, questions, and suggestions regarding both coding conventions and other analyses that focus on location of community based services. You can reach us at [pip@vdh.state.vt.us](mailto:pip@vdh.state.vt.us) or 802-863-7249.



## Location of Eldercare Services FY2002 - FY2005



Analysis is based on extracts from Monthly Service Reports (MSR) submitted to DMH by designated community mental health centers. The extracts from the MSR database included all adults age 60 and older receiving services in Eldercare programs (with cost center equal to 69). A location of "In-Home" includes reporting for "Nursing Home."