

Vermont Mental Health Performance Indicator Project

Agency of Human Services, Department of Mental Health
103 South Main Street, Waterbury, Vermont 05671

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

FROM: John Pandiani and Walter Ochs

DATE: August 27, 2010

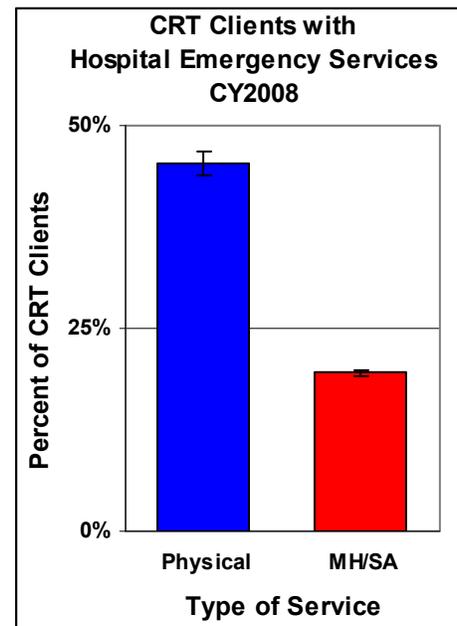
RE: CRT Emergency Room Utilization for Physical and MH/SA by Region

This week's brief report follows a line of enquiry that began with reports on CRT hospital emergency room utilization rates, by region¹ and by age and gender.² This analysis provides CRT hospital emergency room utilization rates for physical health and for mental health or substance abuse services for each of Vermont's ten mental health service areas.

Anonymous extracts from two data sets were used in this analysis. The first data set, the Vermont Uniform Hospital Discharge Data Set, provides the date of birth, gender, county of residence, and type of service for all individuals with emergency visits to hospitals in Vermont, New Hampshire, and New York. The second data set, the Vermont Department of Mental Health Monthly Service Report (MSR) data set, provides the date of birth, gender, and county of residence of all individuals with CRT services during CY2008. Because these data sets do not share unique person identifiers, Probabilistic Population Estimation (PPE) was used to determine the unduplicated number of people shared by the two data sets.

As you will see, CRT clients were more than twice as likely to receive hospital emergency physical health services as to receive mental health or substance abuse services (45% vs. 20%). There were also substantial differences among regions of the state in CRT emergency room utilization rates. Hospital emergency utilization rates for physical health ranged from a high of 59% in Northwest Vermont to a low of 40% in Washington County. Hospital emergency utilization rates for mental health or substance abuse ranged from a high of 24% in Chittenden County to a low of 12% in Lamoille County.

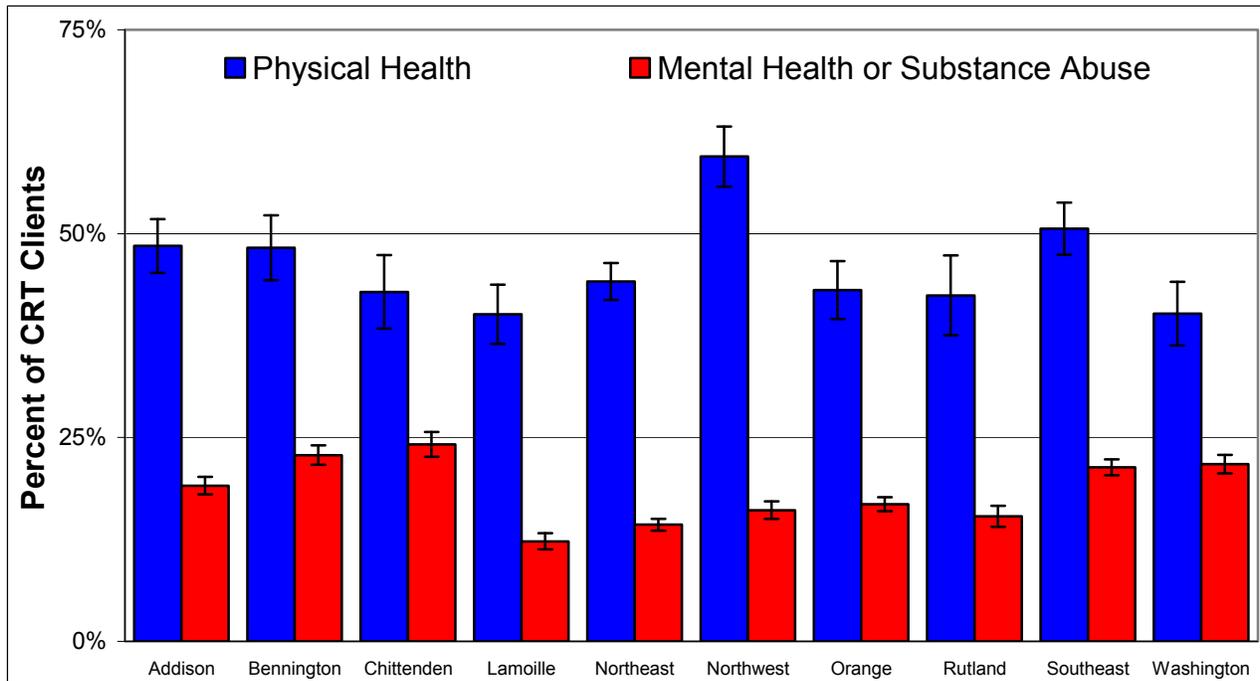
We look forward to your interpretation of these findings, questions, comments, and requests for further analyses. As always, we can be reached at pip@ahs.state.vt.us or 802-241-4049.



¹ http://mentalhealth.vermont.gov/sites/dmh/files/pip/DMH-PIP_June_18_2010.pdf

² http://mentalhealth.vermont.gov/sites/dmh/files/pip/DMH-PIP_May_7_2010.pdf

CRT Client Utilization of Emergency Rooms for Physical Health and Mental Health or Substance Abuse Services by Region During CY2008



Caseload Overlap

Region	CRT CY2008	ER for Physical Health		ER for MH or SA	
		Number	% of CRT	Number	% of CRT
Addison	172 ± 2	83 ± 6	48% ± 3%	33 ± 2	19% ± 1%
Bennington	178 ± 2	86 ± 7	48% ± 4%	41 ± 2	23% ± 1%
Chittenden	661 ± 6	283 ± 30	43% ± 5%	160 ± 10	24% ± 2%
Lamoille	130 ± 2	52 ± 5	40% ± 4%	16 ± 1	12% ± 1%
Northeast	347 ± 3	153 ± 8	44% ± 2%	50 ± 2	14% ± 1%
Northwest	227 ± 2	135 ± 8	59% ± 4%	37 ± 2	16% ± 1%
Orange	178 ± 2	77 ± 6	43% ± 4%	30 ± 1	17% ± 1%
Rutland	297 ± 3	126 ± 15	42% ± 5%	46 ± 4	15% ± 1%
Southeast	392 ± 3	199 ± 12	51% ± 3%	84 ± 4	21% ± 1%
Washington	432 ± 4	174 ± 17	40% ± 4%	94 ± 5	22% ± 1%
Total	3,014 ± 9	1,368 ± 42	45% ± 1%	588 ± 13	20% ± 0.4%

Southeast includes Windham and Windsor; Northeast includes Essex, Orleans & Caledonia;
Northwest includes Grand Isle and Franklin counties.

Analysis based on the Uniform Hospital Discharge Dataset maintained by the VT Department of Health and Monthly Service Record data maintained by the VT Department of Mental Health. Includes adult (age 18 and over) Vermont residents served by emergency rooms (ER) in Vermont and neighboring state hospitals during CY2008, and includes clients served by Community Rehabilitation and Treatment (CRT) programs for adults with serious mental illness during CY2008. "ER for MH or SA" includes ER visits with a Clinical Classification Software (CCS) group of "Mental Health." This includes both mental health and substance abuse services. Physical health includes all other ER visits. Because data sets used in this analysis do not share unique person identifiers, Probabilistic Population Estimation was used to measure caseload size and overlap (with 95% confidence intervals).