

Vermont Mental Health Performance Indicator Project
Vermont 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 Barbara Carroll

DATE: March 26, 2010

RE: Child to Adult Mental Health and Substance Abuse Services

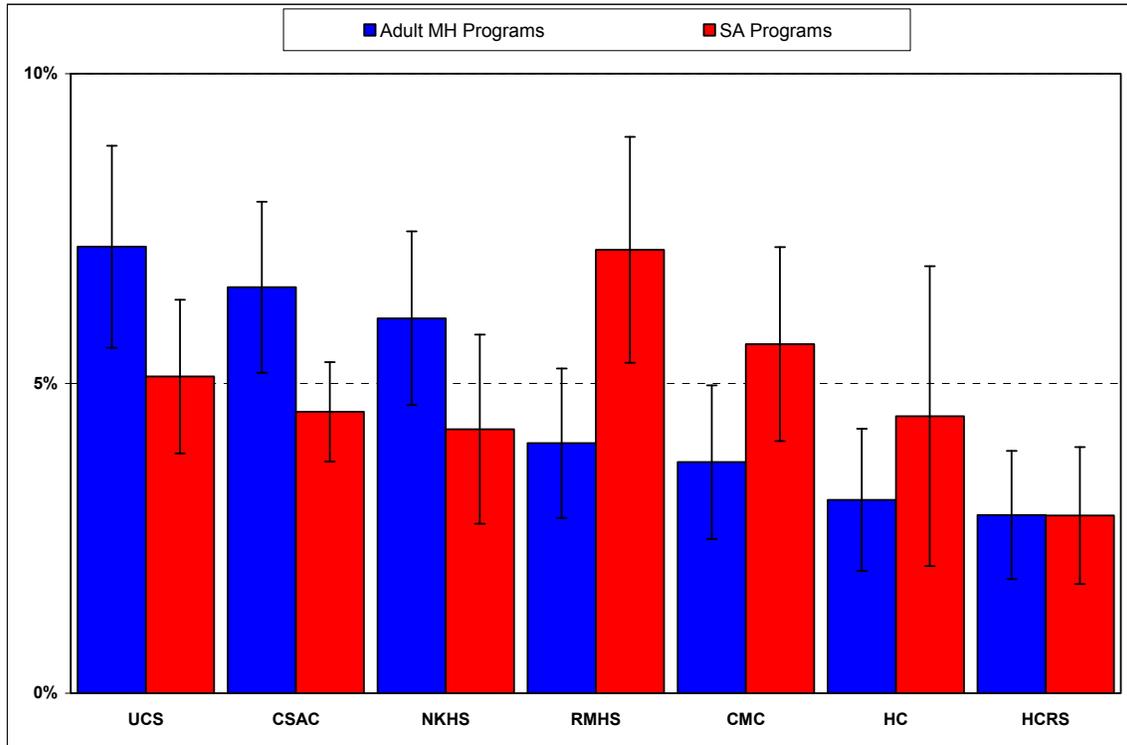
This week's brief report provides information on the proportion of young people who received children's mental health services at Vermont community mental health centers during FY2001-FY2003 when they were 15-17 years of age who subsequently received adult mental health services and the proportion who subsequently received substance abuse services from the same CMHC during FY2007-FY2009 when they were 21 to 23 years of age. This report expands an analysis that was distributed on February 5, 2010 that provided information on the rates at which young people who received children's mental health services in Vermont subsequently received adult mental health services. This analysis was requested by Anne Van Donsel at the Vermont Alcohol and Drug Abuse Program.

These findings are based on analysis of anonymous extracts from the Vermont Department of Mental Health Monthly Service Report (MSR) database for the time periods under examination. The first extract included basic demographic information for all individuals aged 15-17 who were served by children's services programs during FY2001-FY2003. The second and third extracts included basic demographic information for all individuals served by Adult Mental Health programs and Substance Abuse programs when they were 21-23 years old. Because these data sets do not include unique person identifiers, Probabilistic Population Estimation (PPE) was used to determine the number of unique individuals represented in each data set and the number of unique individuals shared across data sets.

As you will see, former recipients of children's mental health services were more likely to receive adult mental health services than substance abuse services at three mental health centers (UCS, CSAC, and NKHS). Former recipients of children's services were more likely to receive substance abuse services than adult mental health services at two mental health centers (RMHS and CMC). The difference was not statistically significant at two mental health centers (HC and HCRS). Three centers do not have adult substance abuse programs.

We look forward to your interpretation of these findings and your suggestions for further analysis of this comprehensive data set. Please forward your comments and suggestions to pip@vdh.state.vt.us or 802.241.4049.

**Clients Aged 15-17 Served in Children's MH Programs in FY2001-FY2003
Receiving Adult MH or SA Services in FY2007-FY2009**



| | 15-17 year olds served by Children's MH | Children also served by | | | |
|------------------|--|-------------------------|-------------|-------------|-------------|
| | | Adult MH Programs | | SA Programs | |
| | | Total | Number | Percent | Number |
| Total | 5,160 ± 39 | 204 ± 23 | 3.9% ± 0.4% | 208 ± 36 | 4.0% ± 0.7% |
| Male | 2,712 ± 29 | 85 ± 15 | 3.1% ± 0.6% | 115 ± 31 | 4.2% ± 1.2% |
| Female | 2,448 ± 26 | 119 ± 17 | 4.8% ± 0.7% | 93 ± 18 | 3.8% ± 0.7% |
| Bennington - UCS | 467 ± 8 | 34 ± 8 | 7.2% ± 1.6% | 24 ± 6 | 5.1% ± 1.2% |
| Addison - CSAC | 645 ± 11 | 42 ± 9 | 6.6% ± 1.4% | 29 ± 5 | 4.5% ± 0.8% |
| Northeast - NKHS | 717 ± 13 | 43 ± 10 | 6.0% ± 1.4% | 31 ± 11 | 4.3% ± 1.5% |
| Rutland - RMHS | 554 ± 10 | 22 ± 7 | 4.0% ± 1.2% | 40 ± 10 | 7.2% ± 1.8% |
| Orange - CMC | 440 ± 8 | 16 ± 5 | 3.7% ± 1.2% | 25 ± 7 | 5.6% ± 1.6% |
| Chittenden - HC | 1,271 ± 27 | 40 ± 15 | 3.1% ± 1.1% | 57 ± 31 | 4.5% ± 2.4% |
| Southeast - HCRS | 873 ± 16 | 25 ± 9 | 2.9% ± 1.0% | 25 ± 10 | 2.9% ± 1.1% |

Analysis is based on anonymous extracts from Monthly Service Reports (MSR) provided to the Vermont Department of Mental Health (DMH) by designated community mental health agencies, including clients aged 15-17 who were served in Children's Mental Health programs in FY2001-FY2003 and clients aged 21-23 who were served in Adult Mental Health (Adult Outpatient or Community Rehabilitation & Treatment) programs or in Substance Abuse (SA) programs in FY2007-FY2009.

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).