

Vermont Mental Health Performance Indicator Project

Agency of Human Services, Department of Health, Department 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 Barbara Carroll

DATE: May 29, 2009

RE: Mental Health Services to Two High Risk Groups

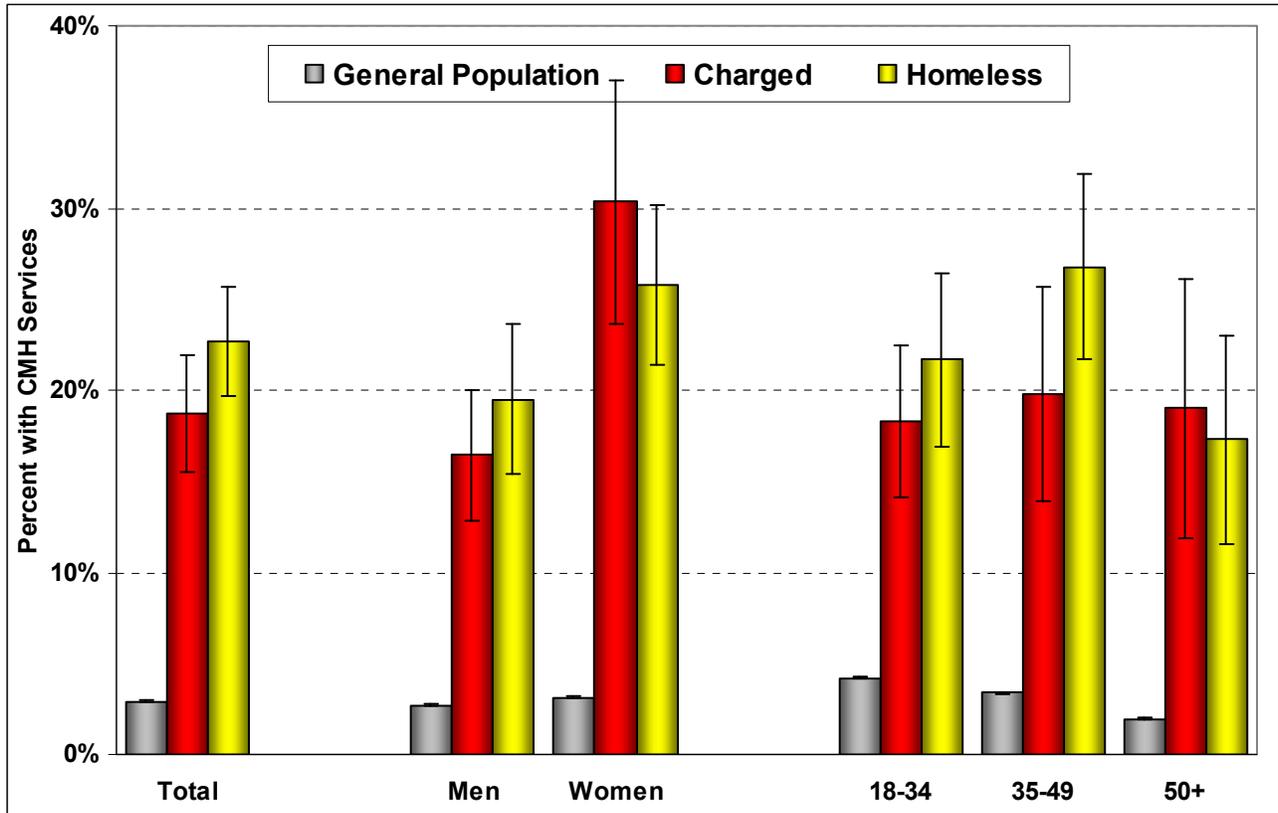
Rates of community mental health service utilization by individuals with an elevated risk of psychological and behavioral disorders are widely considered to be a core measure of access to care. This week's PIP report addresses this area of concern by providing rates of community mental health service utilization for two groups of people with an elevated risk of mental health problems (homeless adults and adults charged with a felony) and comparing these utilization rates to utilization rates for adults in the general population of rural Vermont (excluding Chittenden County).

Anonymous extracts from three data sets were used in this analysis. These include Vermont's balance of state Homeless Management Information System (HMIS), the Vermont Center for Justice Research criminal charging database, and the Vermont Department of Mental Health (DMH) community mental health Monthly Service Report (MSR) database. The HMIS extract included the date of birth and gender of all adults who received homeless services during CY2008. The Center for Justice Research extract included the date of birth and gender of all adults with a felony criminal charge during CY2008. The MSR extract included the date of birth and gender of all adults who were served in CY2008 by a DMH community mental health program for substance abuse, serious mental illness, and other mental or emotional disorders. Because these data sets do not share unique person identifiers, Probabilistic Population Estimation (PPE) was used to determine the number of individuals shared by data sets.

As you will see, community mental health service utilization rates for homeless adults (23% \pm 3%) were significantly higher than community mental health service utilization rates for adults charged with a felony (19% \pm 3%), and both were significantly higher than community mental health service utilization rates for the general population of rural Vermont (2.9% \pm 0.02%). In all three groups, women were significantly more likely than men to receive community mental health services. For the general population and for homeless adults, older adults (aged 50+) were the least likely to receive community mental health services. There was no substantial difference by age group for adults charged with a felony.

We look forward to your suggestions for further analysis of these data. Please send your questions, comments, and interpretation of these findings to 802.863.7249 or pip@vdh.state.vt.us.

Utilization of Community Mental Health Services by Homeless Adults and Adults Charged with a Felony in Rural Vermont: CY2008



	Total	Gender		Age		
		Men	Women	18-34	35-49	50+
VT General Population						
#	370,741	180,538	190,203	94,011	103,988	172,742
# with CMH	10,881 ± 82	4,904 ± 53	5,978 ± 62	3,967 ± 53	3,525 ± 50	3,389 ± 37
% with CMH	2.9% ± 0.02%	2.7% ± 0.03%	3.1% ± 0.03%	4.2% ± 0.06%	3.4% ± 0.05%	2.0% ± 0.02%
Charged with a Felony						
#	1,493 ± 18	1,244 ± 18	248 ± 4	978 ± 17	383 ± 6	131 ± 2
# with CMH	280 ± 47	204 ± 44	75 ± 17	179 ± 41	76 ± 23	25 ± 9
% with CMH	19% ± 3%	16% ± 4%	30% ± 7%	18% ± 4%	20% ± 6%	19% ± 7%
Homeless						
#	1,382 ± 12	692 ± 8	690 ± 9	625 ± 9	487 ± 7	269 ± 4
# with CMH	313 ± 41	135 ± 28	178 ± 30	136 ± 30	131 ± 24	47 ± 15
% with CMH	23% ± 3%	19% ± 4%	26% ± 4%	22% ± 5%	27% ± 5%	17% ± 6%

Analysis is based on the Vermont Center for Justice Research Charging data set, the HIMS service point data set, and the Monthly Service Report data for Community Rehabilitation & Treatment (CRT), Adult Outpatient (AOP) and Substance Abuse (SA) programs for CY2008. Analysis is based on rural Vermont; Chittenden County is not included in this analysis.

Because data sets used in this analysis do not share unique person identifiers, Probabilistic Population Estimation was used to determine caseload size and overlap (with 95% confidence intervals).

Analysis performed by the Vermont Mental Health Performance Indicator Project