

Vermont Mental Health Performance Indicator Project

Agency of Human Services, 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 Brennan Martin

DATE: October 2, 2009

RE: Vermont Homeless with Emergency Room Care for Mental Health

This week's brief report is the second in a series of reports that examine hospital emergency room service utilization patterns for homeless and other Vermont residents. Our September 18, 2009 report focuses on utilization of Vermont general hospital emergency rooms for medical health care during CY2007. This report focuses on utilization of Vermont general hospital emergency rooms for mental health care during CY2007.

Anonymous extracts from two data sets were used in this analysis. The first data set, an extract from the Vermont Uniform Hospital Discharge Data Set, provides the date of birth and gender for all Vermont Emergency Room visits during CY2007 with a mental health primary diagnosis.¹ The second data set, extracts from Point-in-Time Homeless Counts conducted in January 2007 and 2008, provides the date of birth and gender of all individuals identified as homeless at those times. 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.

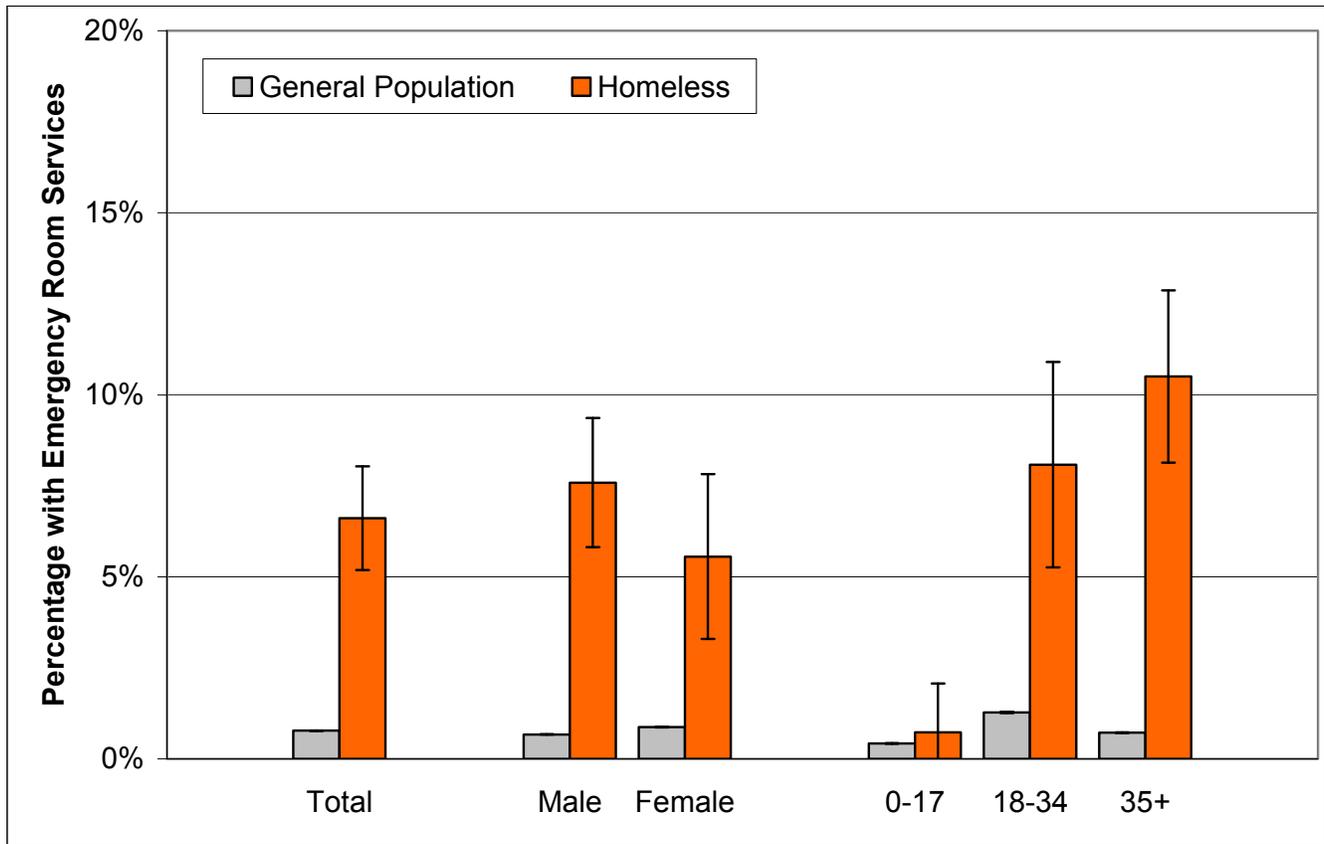
As you will see, almost 7% of homeless individuals had an ER visit for mental health service during CY2007, while less than 1% of Vermont's general population had received a similar service during the same time period.

Homeless men and boys were about ten times as likely as men and boys in the general population to have an ER mental health visit, and homeless women and girls were about six times as likely as women and girls in the general population to have an ER mental health visit. The rate of emergency room utilization for mental health care by homeless youth (less than 18 years of age) was only slightly different from the rate for other youth. Young adult homeless (aged 18-34) were about six times as likely as others in the same age group to receive mental health care in an emergency room, and older adults (aged 35+) were about 15 times as likely as other older adults to receive mental health care in an emergency room.

We look forward to your interpretation of these findings, questions, comments, and requests for further analyses. As always, we can be reached at pip@vdh.state.vt.us or 802-863-7249.

¹For this report, medical primary diagnosis is defined as having a Clinical Classification Software (CCS) High Level Group of mental disorders excluding alcohol and substance related disorders.

Emergency Room **Mental Health** Service Utilization in CY2007 By Homeless Children and Adults, and Other Vermont Residents



	General Population			Homeless			Relative Risk
	Total	Served by ER		Total	Served by ER		
		#	%		#	%	
Total	621,254	4,826 ±34	0.8% ±0.01%	3,198 ±25	211 ±46	6.6% ±1.4%	8.5 ± 1.8
Male	305,785	2,065 ±20	0.7% ±0.01%	1,662 ±17	126 ±29	7.6% ±1.8%	11.2 ± 2.6
Female	315,469	2,761 ±27	0.9% ±0.01%	1,536 ±18	85 ±35	5.6% ±2.3%	6.3 ± 2.6
Age							
0-17	131,353	560 ±11	0.4% ±0.01%	937 ±13	7 ±13	0.7% ±1.3%	1.7 ± 3.1
18-34	131,609	1,681 ±23	1.3% ±0.02%	1,356 ±19	110 ±38	8.1% ±2.8%	6.3 ± 2.2
35+	358,292	2,585 ±22	0.7% ±0.01%	905 ±10	95 ±21	10.5% ±2.4%	14.6 ± 3.3

This report is based on analysis of the Vermont Uniform Hospital Discharge Data Set maintained by the Vermont Department of Health, and data collected in the Vermont Point in Time Homeless Counts conducted in January 2007 and 2008. Mental Health is defined by having a Clinical Classification Software (CCS) designation of mental disorders.

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).

Relative Risk is the rate of homeless Emergency Room utilization divided by the rate of general population Emergency Room utilization. A measure of 2.0 indicates that homeless are twice as likely as the general population to have used the Emergency Room in CY2007.