

## Hospital and Community Service Involvement after State and General Hospital Discharge

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Applied research and evaluation in mental health services has a long tradition of measuring service system performance by examining the experiences of individuals discharged from inpatient care. Examples include rates of readmission within specified time periods (URS), and post-discharge participation in community services (HEDIS). Other important concerns include levels of criminal justice involvement after discharge and access to adequate housing. This presentation will report on these post-discharge outcomes for all adults discharged from psychiatric treatment in both state and general hospitals in Vermont during a one-year period.

All measures will be based on analysis of anonymous extracts from widely available administrative databases. Data regarding inpatient psychiatric care have been extracted from the Vermont State Hospital database and the Hospital Discharge Database maintained by the Vermont Department of Health. Data regarding community treatment after hospital discharge have been extracted from a Community Mental Health Center treatment database maintained by the Vermont Division of Mental Health and the paid claims database maintained by the Vermont Medicaid Division. Data regarding community residential situation have been extracted from federal Department of Housing and Urban Development subsidized housing databases, a Nursing Home database maintained by the Vermont Department of Aging and Disabilities, and the database maintained by the Vermont Department of Corrections. Data regarding crime victimization and criminal offences have been extracted from databases maintained by the Vermont Department of Public Safety. Post-discharge measures will be presented for specified periods of time after discharge (e.g. 30, 60, and 90 days), as well as for longer periods of time (e.g. 1 year).

Because the data sets used in these analyses do not include unique person identifiers, Probabilistic Population Estimation (PPE) is used to determine the unduplicated number of people shared across data sets.

Analysis will focus on the more than 2,000 individuals who were discharged from state and general hospital psychiatric care in Vermont during 2004. All analyses will include special attention to gender and age-related differences. Preliminary analyses that focused on state hospital discharges during a one-year period indicate that women were substantially more likely than men to access HUD Section 8 and nursing home residential situations, while men were substantially more likely than women to be incarcerated after discharge.

Prior to the conference, findings were shared with a wide range of stakeholders in order to obtain interpretations of the findings and opinions regarding their policy implications. These stakeholders' interpretations and the implications for the enhancement of mental health services that they identified will also be included in this presentation. During the presentation, opinions regarding interpretations and implications of the findings will be

solicited from the audience, as will ideas regarding the values and expectations that drive these interpretations and implications.