

**Child and Adolescent Hospitalization Related to CMH Services in Kentucky:
2001-2005****Authors/Presenters:**

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This poster presentation provides a statistical overview of the utilization of inpatient behavioral health services by children and adolescents during a five year period. This period was marked by a substantial increase in hospitalization by children and adolescents and the implementation of community Crisis Stabilization programs designed to reduce hospitalization rates. This research is part of an on-going program of applied research and evaluation initiative that focuses on access to mental health services and the outcomes of those services.

Two data sets are used in this analysis. The first data set was extracted from the Kentucky Department for Public Health's Hospital Discharge Data Set for each of the five years under examination. This data set includes all discharges from all Kentucky general hospitals and private psychiatric hospitals during the study period. For purposes of this analysis, episodes of care classified with major diagnostic codes for mental health and substance abuse were selected. The second data set includes client and event data from the fourteen Community Mental Health Centers during the study period. This second data set included a data set specific person identifier, but the first data set included no unique person identifiers.

Three measures of inpatient psychiatric utilization are used in this analysis: number of discharges, number of patient days, and the unduplicated number of children and adolescents hospitalized. Because these data sets do not share unique person identifiers, Probabilistic Population Estimation was used to determine the unduplicated number of CMHC service recipients who were also hospitalized.

During the study period, utilization of inpatient behavioral health care by children and adolescents more than doubled. The number of patient days increased by a factor of 2.2 (from 46,065 to 101,588), the unduplicated number of children and adolescents hospitalized increased by a factor of 2.3 (from 1,683 to 3,939), and the number of hospitalizations increased by a factor of 2.7 (from 2,352 to 6,275).

This poster will provide information on variation in these measures of utilization among regions of the state and among age and gender cohorts. This poster will also provide information on the relationship between hospital utilization rates, community mental health utilization rates and the impact of community-based crisis stabilization programs on hospital utilization rates, during the study period.