Colorado's High Intensity Mental Health Service Utilizers: Overlap with Child Welfare, juvenile Justice, Substance Abuse, and Developmental and Intellectual Disability Services

A Supplemental Report

Strong minds, strong futures.

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COLORADO'S HIGH INTENSITY MENTAL HEALTH SERVICES UTILIZERS:

Service utilization varies between those with acute vs. chronic mental health issues; acute care requires relatively low intensity, infrequent system use while chronic, serious mental illness at times may require 24-hour care. In the interest of investigating maximum efficiencies and achieving the greatest impact possible, the highest cost clients in the public mental health system were of focus. By understanding other system usage we can identify possible efficiencies and redundancies in services. The information also serves to reinforce the need for system coordination.

HOW WAS THE SAMPLE SELECTED?

The Colorado State Office of Behavioral Health provided data for all clients served in FY2011-2012. The population was comprised of 36,392 individuals age 21 and younger. Those that had an indication of psychiatric hospitalization from either the Colorado Client Assessment Record (CCAR) data or Public Mental Health Encounter data were selected as users of high intensity mental health services. The high intensity utilizer sample was comprised of 6,392 individuals (18.8% of the children and young adults who received mental health services).

 The mean number of service units for the high intensity utilizers was 41.1 whereas, those children and young adults without an indication of psychiatric hospitalization was 21.4 units.

WHO WERE THESE CHILDREN AND YOUNG ADULTS?

- Gender: 50.2% Male (n=3210), 49.8% Female (n=3182).
- Ethnicity: 76.4% Not Hispanic (n=4886), 23.6% Hispanic (n=1506).
- Race: 54.7% White (n=3494), 9.9% African American (n=630), .3% Multi-Racial (n=22), 0.4% Hawaiian (n=24), 0.8% Asian (n=51)¹.

¹ Race data were missing for 497 children.







- Age: Children ranged in age from under 1 year old to 21 years old. Mean = 15.7, Median = 16.0.
- Diagnosis: See Table 1.

Most Recent Diagnosis by MH Services ²	Frequency	Percent
Adjustment	1664	26.0
Anxiety	877	13.7
Conduct Disorder	393	6.1
Attention Deficit Disorder	385	6.0
Major Depression	1288	20.2
Bipolar Disorder	846	13.2
Thought Disorder	461	7.2
Other	478	7.4
Total	6392	100.0

² Diagnoses came from most recent CCAR (Colorado Client Assessment Record – clinical assessment conducted for all clients served in the public mental health system)







ANALYSIS APPROACH

Historical data included any case open FY2006-07 through FY2012-13 from Division of Youth Corrections (DYC), Developmental and Intellectual Disabilities Division (DD), and Office of Behavioral Health (OBH) substance use data (SUD). Records for cases open FY2003-04 through FY2012-13 were obtained from the Division of Child Welfare (CW). An earlier start date was necessary in the CW data to fully capture all CW involvement because children are eligible for CW services from birth through age 21 whereas DYC only serves children over the age of 10. These data were then merged with the mental health high intensity utilizers to determine the overlap between child welfare, juvenile justice, substance use services and developmental disability services for these 6,392 children and young adults.

FINDINGS

- 38.8% (2483 children) of the Mental Health sample did not overlap with at least one of the other four service populations (CW, DYC, SUD, DD).
- Almost half (46.4%, 2969 children) of the children in the sample were involved in the child welfare system since FY2002-2003.
- One in five youth (22.0%, 1407 children) had involvement in the juvenile justice system.
- Similarly, 20.9% (1337) of the mental health sample received substance use services at some point in FY2006-2013.
- Slightly under 3% (170) received services from Developmental /Intellectual Disabilities
 Division







- Of the 170 in MH/DD, over half (54%) had involvement in CW also
- Services from four systems were received by slightly over 6%, or 395 children. 95.5% of those were MH/CW/DYC/SU.
- All five systems were accessed by 4 individuals.

The overlap in system use for these high cost individuals is significant. By understanding other system usage we can program possible efficiencies and eliminate redundancies in services. The information serves to reinforce the need for system coordination.







Figure I depicts the overall numbers of children involved in each service population or combination of populations.

Figure 1. Overlap in Service Populations Between Colorado Mental Health High Intensity Utilizers, Division of Youth Corrections, Substance Abuse, Child Welfare, and Developmental Disabilities.

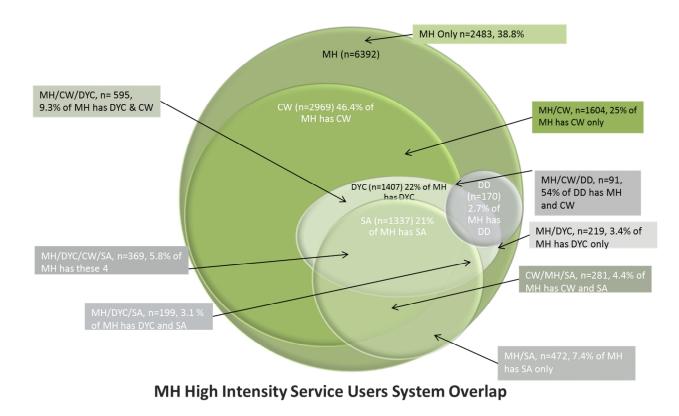














Table 2. Service Population Percent Overlap of Colorado Mental Health High Utilizers and theDivision of Youth Corrections, Substance Abuse, Child Welfare, and Developmental/IntellectualDisabilities

Service Population	Frequency	% of Total
Child Welfare Total	2969	46.4 of MH
DYC Total	1407	22.0 of MH
Substance Use Total	1337	20.9 of MH
Developmental/Intellectual Disabilities Total	170	2.7 of MH
DYC Only	219	3.4 of MH
Child Welfare Only	1604	54.0 of CW
Substance Use Only	472	35.3of SU
DID Only	43	25.3 of DID
Child Welfare and DID	91	53.5 of DID
Child Welfare and SU	281	4.4 of MH
Child Welfare and DYC	595	9.3 of MH
DYC and SU	199	14.1 of DYC
DYC and DID, SU and DID	6	0







Child Welfare, DYC, and SU	369	5.8 of MH
Child Welfare, DYC and DID	17	10 of DID
Child Welfare, SU, and DID	8	4.7 of DID
Child Welfare, DYC, SU, and DID	4	.I of MH





