

# A COMPARISON OF FACE-TO-FACE EMERGENCY EVALUATIONS OF VETERANS AND NON-VETERANS CONDUCTED BY COMMUNITY SERVICES BOARDS IN APRIL 2013

*Funded by the Virginia Department of Behavioral Health and Developmental Services, and in collaboration with the Virginia Association of Community Services Boards*



Virginia Association Of  
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Arlington County Community Services Board  
Blue Ridge Behavioral Healthcare  
Chesapeake Community Services Board  
Chesterfield Community Services Board  
Colonial Services Board  
Crossroads Community Services Board  
Cumberland Mountain CSB  
Danville-Pittsylvania Community Services  
Dickenson County Behavioral Health Services  
District 19 Community Services Board  
Eastern Shore Community Services Board  
Fairfax-Falls Church Community Services Board  
Goochland-Powhatan Community Services  
Hampton-Newport News CSB  
Hanover County Community Services Board  
Harrisonburg-Rockingham CSB  
Henrico Area Mental Health &  
Developmental Services  
Highlands Community Services  
Horizon Behavioral Health  
Loudoun County Community Services Board  
Middle Peninsula-Northern Neck CSB  
Mount Rogers Community Mental Health &  
Mental Retardation  
New River Valley Community Services  
Norfolk Community Services Board  
Northwestern Community Services  
Piedmont Community Services  
Planning District One Behavioral Health Services  
Portsmouth Department of Behavioral  
Healthcare Services  
Prince William County CSB  
Rappahannock Area Community Services Board  
Rappahannock-Rapidan CSB  
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## PREFACE

This is a companion report to the 2013 study regarding emergency evaluations at the 40 Community Services Boards throughout the Commonwealth of Virginia. This is one of two companion reports focusing on emergency evaluations of veterans from the main study.

This brief report compares demographic and clinical characteristics of veterans and non-veterans, as well as the circumstances surrounding and results of their evaluations, including location, police custody status, and disposition. It also provides an overview of the number and proportion of veteran evaluations conducted, presented by Planning Partnership Region (PPR) and Community Services Board (CSB). This report seeks to reveal some of the unique characteristics of veteran evaluations, and it aims to identify regions and CSBs that may serve higher volumes of veteran consumers. Data are available for local analysis if desired.

Like other reports from this series, this report is the work of the Research Team and offers no interpretations of the findings; nor does it propose any recommendations. The report was prepared as a resource for policymakers and all the stakeholder organizations in the field. Please feel free to distribute this report to interested parties. It is hosted at

<http://cacsprd.web.virginia.edu/ILPPP/PublicationsAndPolicy/Index/Policy>, and can be shared directly with others using this download link:  
<http://cacsprd.web.virginia.edu/ILPPP/PublicationsAndPolicy/DownloadPDF/69>.

The full-length veteran companion report, describing each veteran evaluation that was conducted by CSBs in the Commonwealth of Virginia in April, 2013, is available at <http://cacsprd.web.virginia.edu/ILPPP/PublicationsAndPolicy/DownloadPDF/70>.

Please also note that the full-length report, *A Study of Face-to-Face Emergency Evaluations Conducted by Community Services Boards in April 2013*, can be found at <http://cacsprd.web.virginia.edu/ILPPP/PublicationsAndPolicy/DownloadPDF/66>.

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## OVERVIEW OF THE CURRENT REPORT

In April 2013, a study regarding emergency evaluations at the 40 Community Services Boards throughout the Commonwealth of Virginia took place. The current report presents the findings from this study for veterans only. For information on the purpose and methodology behind the 2013 study, please see *A Study of Face-to-Face Emergency Evaluations Conducted by Community Services Boards in April 2013*. This full-length report includes data collected on all emergency evaluations of individuals experiencing a mental health or substance abuse crisis in Virginia in April 2013. Data for adults are found in Section I, and data for juveniles are found in Section II.

The current report presents a summary of the comparison of results for veterans and non-veterans from the April 2013 study. It also provides a brief overview of the number and proportion of veteran evaluations conducted by Planning Partnership Region (PPR) and Community Services Board (CSB). Appendix 1 shows the location of each CSB and PPR, and Appendix 2 lists the CSBs that are in each PPR and the corresponding PPR number.

### General Finding

Although veterans differed in some respects from other persons evaluated in April, 2013, and the characteristics, findings and dispositions of the evaluations in cases involving veterans differed in some ways from other cases, none of the differences were sufficiently large to invite further attention from a statewide policy standpoint. It is possible that some findings in the jurisdictions with the highest number of veteran evaluations may be of policy interest, and the data are available for local analysis.

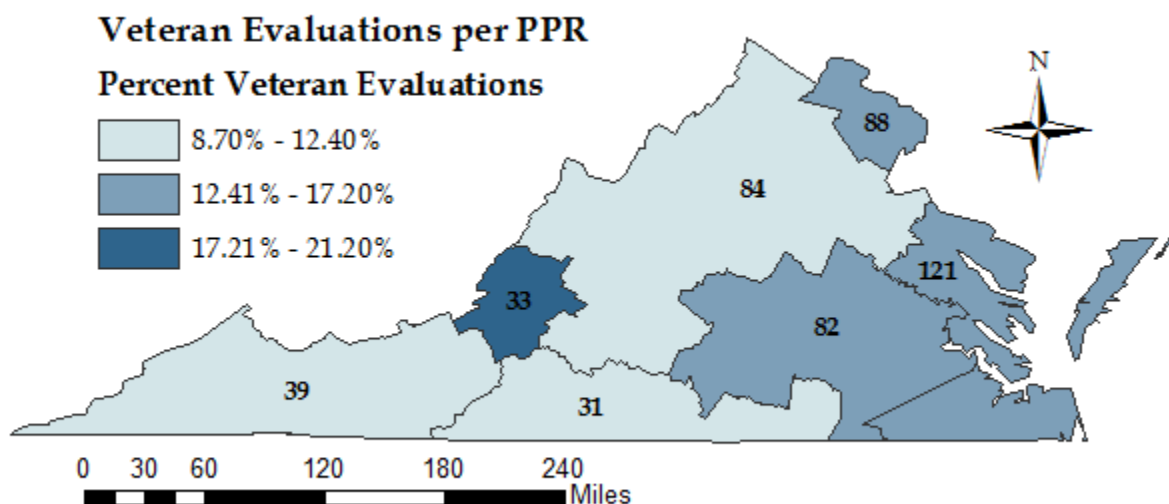
## Regional Variations in the Number and Proportion of Veteran Evaluations

► Overall proportion of veteran CSB evaluations statewide in April, 2013<sup>1</sup>: 14.5%

### *Regional variations in veteran CSB evaluations, by PPR*

Virginia's seven PPRs, alongside each region's proportion and number of veteran emergency evaluations, are shown in Figure 1. The CSBs located in each region are listed below the map.

**Figure 1. Proportions and numbers<sup>2</sup> of veteran evaluations conducted by Community Services Boards in the Commonwealth of Virginia in April 2013, by PPR**



<sup>1</sup> We excluded the active military and people for whom this question was missing. We included people who answered that military status was unknown as "not veteran" after looking at this population's insurance and finding that most who answered "unknown" did not have military or veterans benefits, similar to people who said they had no military status.

<sup>2</sup> The number of veteran evaluations conducted in each region is displayed on the map inside of the regional boundaries.



- ▶PPR 1 (Northwestern) – Harrisonburg-Rockingham, Horizon, Northwestern, Rappahannock Area, Rappahannock-Rapidan, Region Ten, Rockbridge Area, and Valley
- ▶PPR 2 (Northern) - Alexandria, Arlington, Fairfax-Falls Church, Loudoun County, and Prince William
- ▶PPR 3 (Southwestern) – Cumberland Mountain, Dickenson County, Highland, Mount Rogers, New River Valley, and Planning District One
- ▶PPR 4 (Central) – Chesterfield, Crossroads, District 19, Goochland-Powhatan, Hanover, Henrico, and Richmond BHA
- ▶PPR 5 (Eastern) – Chesapeake, Colonial, Eastern Shore, Hampton-Newport News, Middle Peninsula-Northern Neck, Norfolk, Portsmouth, Virginia Beach, and Western Tidewater
- ▶PPR 6 (Southern) –Danville-Pittsylvania, Piedmont Community Services, and Southside
- ▶PPR 7 (Catawba) – Alleghany/Highlands and Blue Ridge Behavioral Healthcare

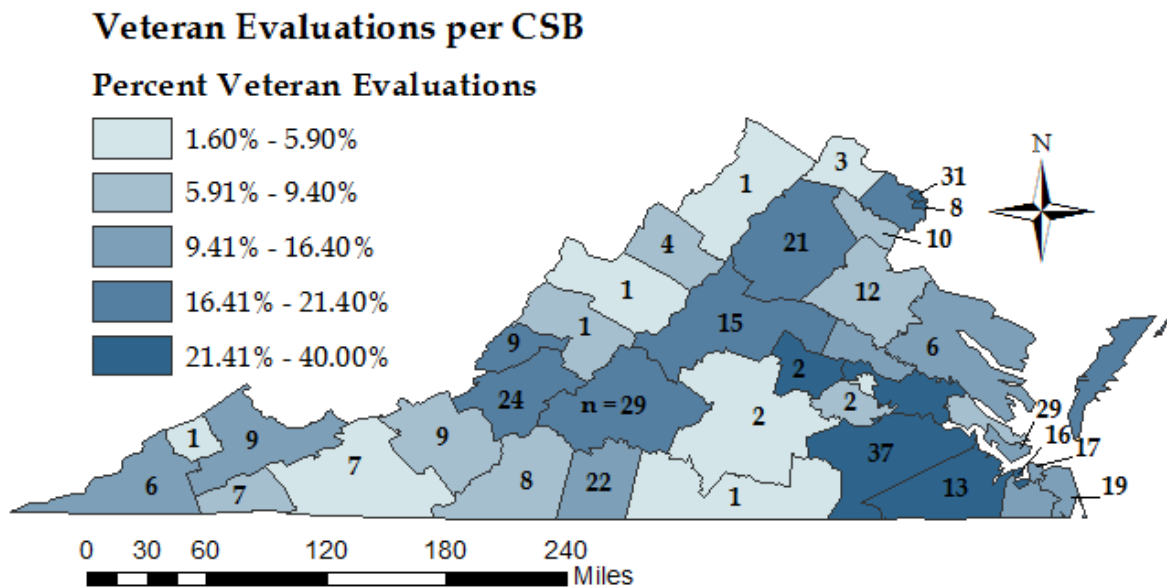
**Table 1. Regional variations in veteran CSB evaluations, by PPR**

PPR	Total Number of Evaluations	Number of Veteran Evaluations	Percentage Veteran Evaluations
Southwestern	450	39	8.7
Southern	265	31	11.7
Northwestern	676	84	12.4
Eastern	759	121	15.9
Northern	518	88	17.0
Central	478	82	17.2
Catawba	156	33	21.2

### *Regional variations in veteran CSB evaluations, by CSB*

Virginia's 40 CSBs, alongside each CSB's proportion and number of veteran emergency evaluations are shown in Figure 2. A map displaying the location and name of each CSB can be found in Appendix 1.

**Figure 2. Proportions and numbers<sup>3</sup> of veteran evaluations conducted by Community Services Boards in the Commonwealth of Virginia in April 2013, by CSB**



**Table 2. CSBs with the highest proportion of veteran evaluations**

CSB	Total Number of Evaluations	Number of Veteran Evaluations	Percentage Veteran Evaluations
Goochland-Powhatan	5	2	40.0
Portsmouth	42	16	38.1
District 19	108	37	34.3
Arlington	98	31	31.6
Alexandria	26	8	30.8

<sup>3</sup> The number of veteran evaluations conducted by each CSB is displayed on the map inside of the CSB regional boundaries.

**Table 3. CSBs with the highest number of veteran evaluations**

<b>CSB</b>	<b>Total Number of Evaluations</b>	<b>Number of Veteran Evaluations</b>	<b>Percentage Veteran Evaluations</b>
<b>District 19</b>	108	<b>37</b>	34.3
<b>Fairfax-Falls Church</b>	212	<b>36</b>	17.0
<b>Arlington</b>	98	<b>31</b>	31.6
<b>Horizon</b>	148	<b>29</b>	19.6
<b>Hampton-Newport News</b>	219	<b>29</b>	13.2

**Table 4. CSBs with the lowest proportion of veteran evaluations**

	<b>Total Number of Evaluations</b>	<b>Number of Veteran Evaluations</b>	<b>Percentage Veteran Evaluations</b>
<b>Northwestern</b>	61	<b>1</b>	<b>1.6</b>
<b>Valley</b>	60	<b>1</b>	<b>1.7</b>
<b>Loudon</b>	60	<b>3</b>	<b>5.0</b>
<b>Mountain Rogers</b>	135	<b>7</b>	<b>5.2</b>
<b>Crossroads</b>	38	<b>2</b>	<b>5.3</b>

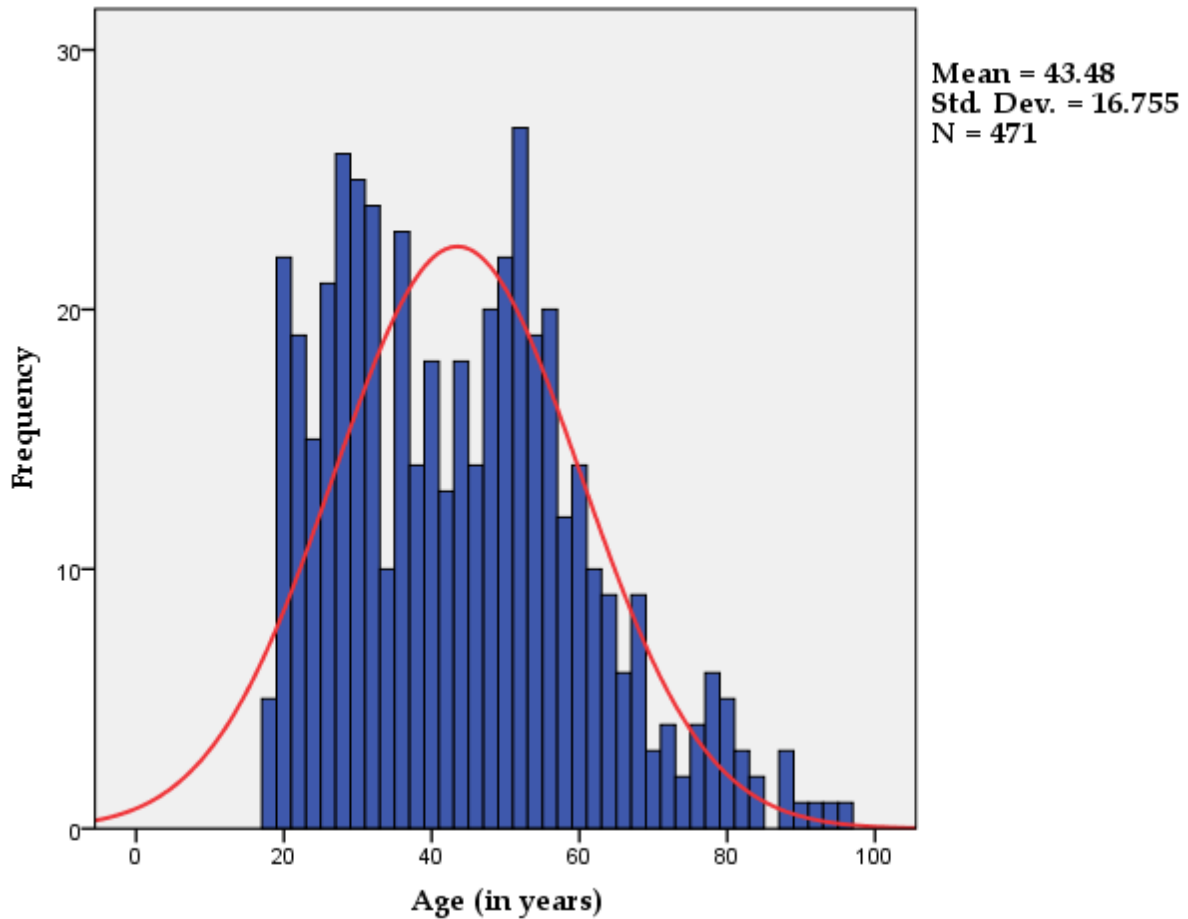
**Table 5. CSBs with the lowest number of veteran evaluations**

<b>CSB</b>	<b>Total Number of Evaluations</b>	<b>Number of Veteran Evaluations</b>	<b>Percentage Veteran Evaluations</b>
<b>Northwestern</b>	61	<b>1</b>	1.6
<b>Valley</b>	60	<b>1</b>	1.7
<b>Southside</b>	27	<b>1</b>	3.7
<b>Dickson County</b>	18	<b>1</b>	5.6
<b>Rockbridge</b>	13	<b>1</b>	7.7

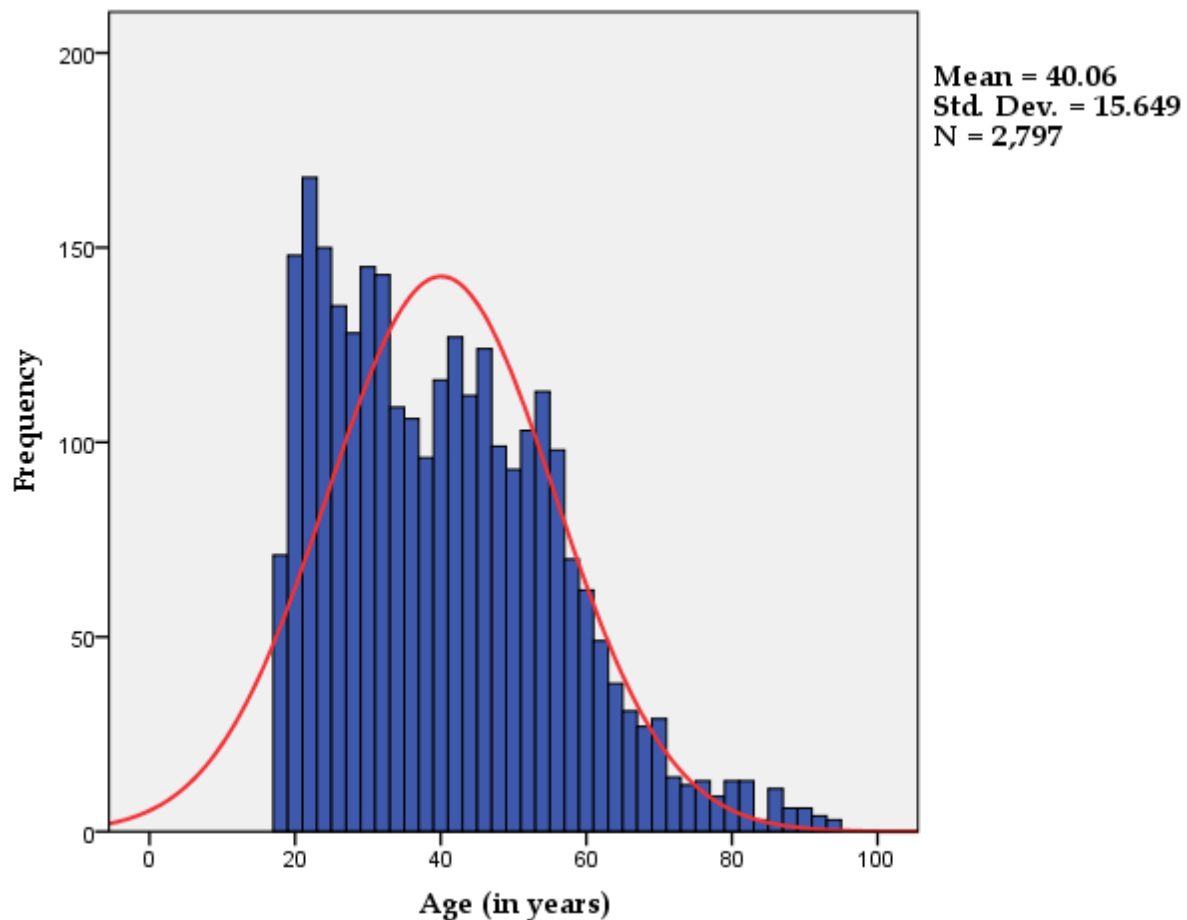
## Statistically Significant Differences between Veterans and Non-Veterans

**Age:** Veterans skew slightly older (mean age of 43.5 vs. 40.1) and have a greater variance of ages.

**Figure 3. Age of veterans evaluated during the survey month**



**Figure 4. Age of non-veterans evaluated during the survey month**



**Sex:** More veterans are male than non-veterans (61.3% vs. 47.8%), and fewer veterans are female (38.7% vs. 52.2%),  $p < 0.0001$ ,  $\Phi_{\text{Cramer}} = 0.09$ .

**Place of evaluation:** There were slight differences in where the evaluation took place ( $p = 0.004$ ,  $\Phi_{\text{Cramer}} = 0.08$ ):

- More veterans had evaluations in a hospital (58.8% vs. 56.0%)
- Fewer veterans had evaluations at a CSB (26.3% vs. 28.5%)
- More veterans had evaluations in a public location (1.7% vs. 0.4%)

**Clinical presentation:** Clinicians indicated that more veterans presented without either mental illness or substance abuse disorder (3.1% vs. 1.7%,  $p = 0.03$ ,  $\Phi_{\text{Cramer}} = 0.04$ ).

**Treatment:** More veterans received “other community services” than non-veterans (6.3% vs. 3.9%,  $p=0.02$ ,  $\Phi_{\text{Cramer}} = 0.04$ ). As expected, more veterans received services from a VA hospital than non-veterans (2.3% vs. 0.04%, Fisher’s exact test:  $p < 0.0001$ ).

**Insurance:** Fewer veterans had Medicaid than non-veterans (25.0% vs. 30.0%,  $p = 0.04$ ,  $\Phi_{\text{Cramer}} = -0.04$ ). More veterans had Medicare than non-veterans (27.4% vs. 22.3%,  $p = 0.01$ ,  $\Phi_{\text{Cramer}} = 0.04$ ). More veterans had military or veteran benefits than non-veterans (11.2% vs. 1.1%,  $p < 0.0001$ ,  $\Phi_{\text{Cramer}} = 0.22$ ). More veterans had at least one form of insurance than non-veterans (67.8% vs. 62.5%,  $p = 0.03$ ,  $\Phi_{\text{Cramer}} = -0.04$ ).

**Police custody:** More veterans were in police custody (32.7% vs. 27.1%,  $p = 0.01$ ,  $\Phi_{\text{Cramer}} = 0.04$ ).

**Ability to address the client's needs with available resources:** Clinicians were able to address veterans' needs in a slightly smaller proportion of cases (84.7% vs. 88.7%,  $p = 0.01$ ,  $\Phi_{\text{Cramer}} = 0.04$ ).

**Disposition:** Comparing all possible dispositions:

Fewer veterans were voluntarily hospitalized (14.1% vs. 18.2%), more declined referrals (5.3% vs. 3.2%), fewer were referred for crisis intervention (2.7% vs. 4.0%), fewer were referred for outpatient services (17.4% vs. 19.2%), and more were found not to be in need of further evaluation or services (6.9% vs. 3.8%). For all comparisons,  $p = 0.002$  and  $\Phi_{\text{Cramer}} = 0.112$ .

*We recoded dispositions in the following categories:* referred for any treatment, not in need of any psychiatric treatment/evaluation, in need of treatment but did not receive it, and arrested/jailed. The first three categories encompassed multiple dispositions.

- "Referred for any treatment" consisted of: all psychiatric treatments including voluntary and involuntary hospitalization, crisis stabilization, outpatient therapy, etc.
- "Not in need of any psychiatric treatment" consisted of: no further evaluation or treatment required, help but not medical or psychiatric, medical admission, released with safety plan, released to family
- "In need of psychiatric treatment and did not receive it" consisted of: left against medical advice, no bed, declined referral and no involuntary action pursued

After doing a chi-square test with these four dispositions, we found that proportionally more veterans were jailed (1.5% vs. 0.5%), were found not to need any psychiatric treatment (9.2% vs. 6.4%), and were in need of psychiatric treatment but did not receive it (6.2% vs. 3.5%). Proportionally fewer veterans were referred for any psychiatric treatment (83.1% vs. 89.6%). For all comparisons,  $p = 0.0003$  and  $\Phi_{\text{Cramer}} = 0.08$ .

**Admitting facility:** Fewer veterans were admitted via a TDO to a private/community psychiatric facility/unit (83.7% vs. 88.0%,  $p = 0.02$ ,  $\Phi_{\text{Cramer}} = 0.1$ ) and more veterans were admitted via a TDO to the emergency department or medical unit of a private/community hospital (7.3% vs. 2.5%,  $p = 0.02$ ,  $\Phi_{\text{Cramer}} = 0.1$ ).

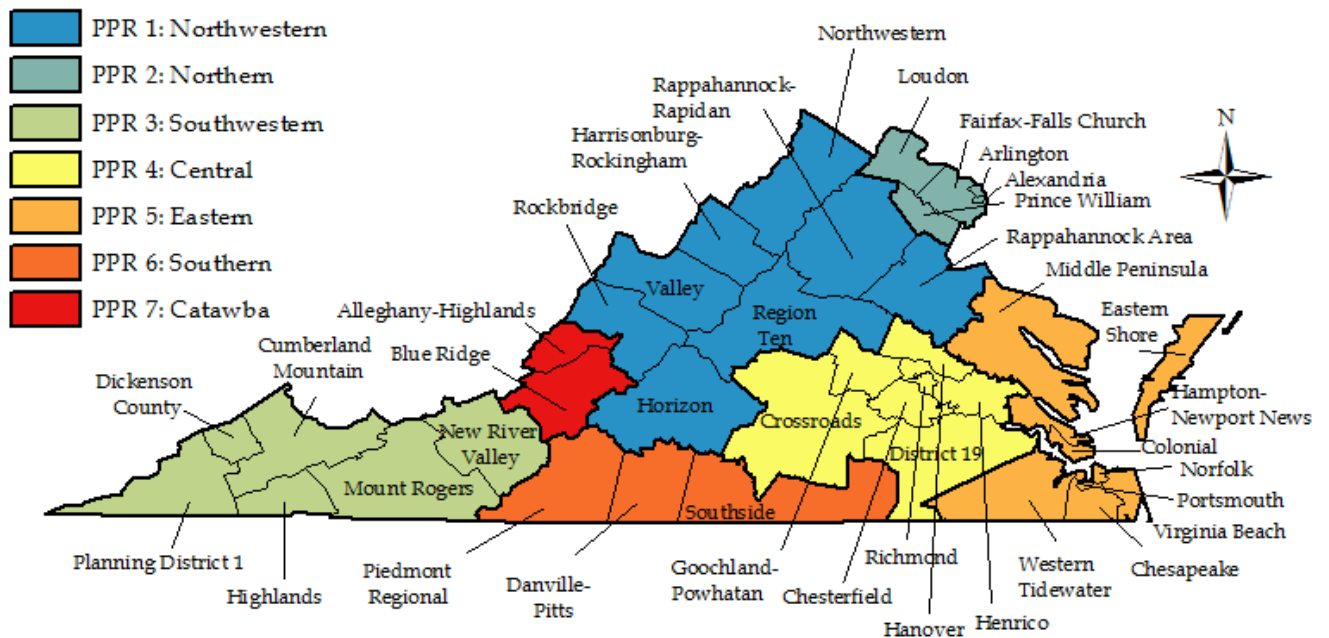
**Resources that would have helped client:** Fewer veterans would have benefitted from short-term crisis intervention (4.0% vs. 8.1%,  $p = 0.002$ ,  $\Phi_{\text{Cramer}} = 0.06$ ). More veterans needed some other service not listed on the survey (8.2% vs. 4.7%,  $p = 0.001$ ,  $\Phi_{\text{Cramer}} = -0.06$ ).

**Behaviors bearing on the commitment criteria:** More veterans made verbal threats to seriously physically harm someone (10.3% vs. 7.3%,  $p = 0.03$ ,  $\Phi_{\text{Cramer}} = 0.04$ ).

## Appendix 1

### Community Services Boards in Virginia by Planning Partnership Region (PPR)

#### PPR





## Appendix 2

### Community Services Boards (CSBs) by Planning Partnership Region (PPRs)

PPR	CSB name
1	Harrisonburg-Rockingham Community Services Board
	Horizon Behavioral Health
	Northwestern Community Services
	Rappahannock Area Community Services Board
	Rappahannock-Rapidan Community Services Board
	Region Ten Community Services Board
	Rockbridge Area Community Services
	Valley Community Services Board
2	Alexandria Community Services Board
	Arlington County Community Services Board
	Fairfax-Falls Church Community Services Board
	Loudoun County Community Services Board
	Prince William County Community Services Board
3	Cumberland Mountain Community Services Board
	Dickenson County Behavioral Health Services
	Highlands Community Services
	Mount Rogers Community MH and MR
	New River Valley Community Services
	Planning District One Behavioral Health Services
4	Chesterfield Community Services Board
	Crossroads Community Services Board
	District 19 Community Services Board
	Goochland-Powhatan Community Services
	Hanover County Community Services Board
	Henrico Area Mental Health; Developmental Services
	Richmond Behavioral Health Authority
5	Chesapeake Community Services Board
	Colonial Services Board
	Eastern Shore Community Services Board
	Hampton-Newport News Community Services Board
	Middle Peninsula-Northern Neck Community Services Board
	Norfolk Community Services Board
	Portsmouth Department of Behavioral Healthcare Services
	Virginia Beach Community Services Board
	Western Tidewater Community Services Board
6	Danville-Pittsylvania Community Services
	Piedmont Community Services
	Southside Community Services Board
7	Alleghany-Highlands Community Services Board
	Blue Ridge Behavioral Healthcare