

# Westchester County Department of Health



2024.04

#### Community Health Data Report

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#### Mental/Behavioral Health-Related Hospitalizations During 2020 Pandemic

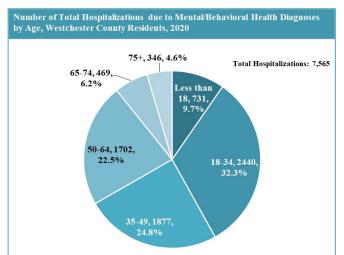
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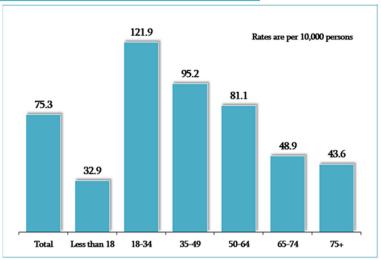
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Prepared by WCDH Planning & Evaluation

Project Staff: Angel Charlise Medical Data Analyst

Director: Jiali Li, Ph.D. Director of Research & Evaluation A total of 7,565 cases were hospitalized and discharged due to mental/behavioral health diagnoses in 2020\*. The rate of hospitalization was highest for the 18-34 age group, and then decreased with age for each subsequent age group.



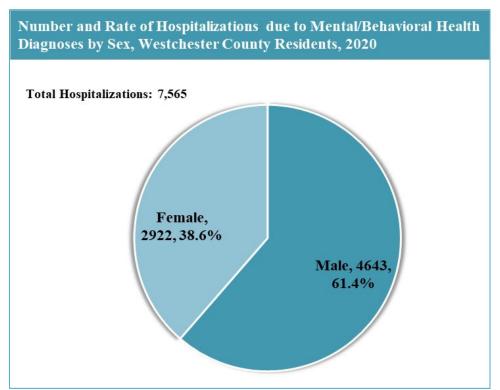


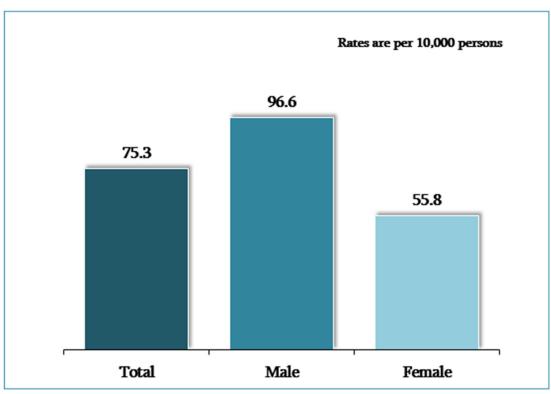
\*Note: Hospitalizations include those admitted during and prior to 2020, but discharged in 2020. Cases admitted in 2020 that have not yet been discharged in 2020 are excluded.



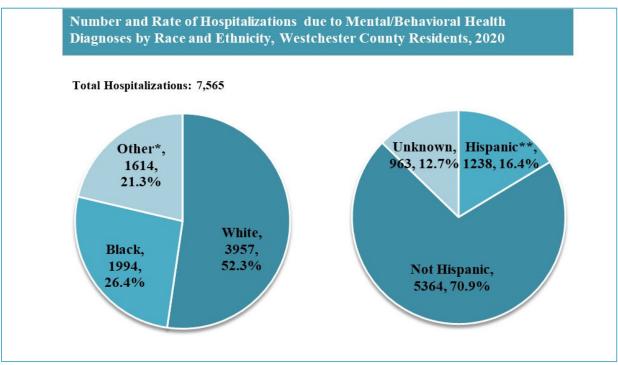
George Latimer, County Executive Sherlita Amler, MD, Commissioner Department of Health

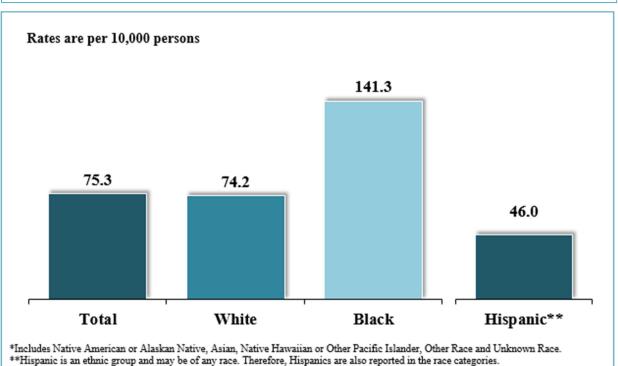
Over 60% of the hospitalizations occurred among males.



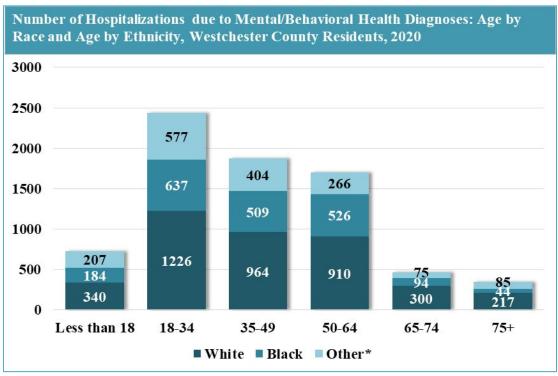


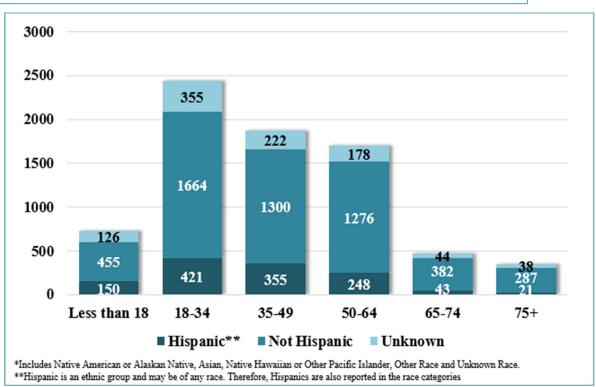
Over half of the hospitalizations occurred among individuals who were White or Non-Hispanic. However, the rate of hospitalizations per 10,000 population was found to be the highest among Black individuals—almost double the rate for White individuals. Hispanic individuals had a lower rate of hospitalization for mental/behavioral health diagnoses.



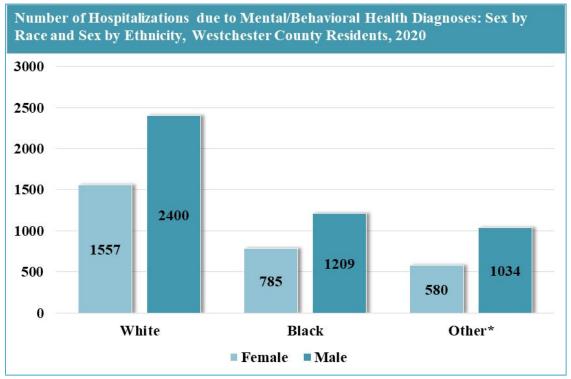


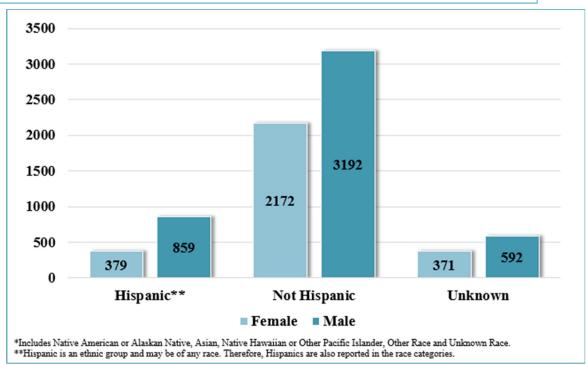
White or Non-Hispanic individuals made up the majority of hospitalizations among all age groups.





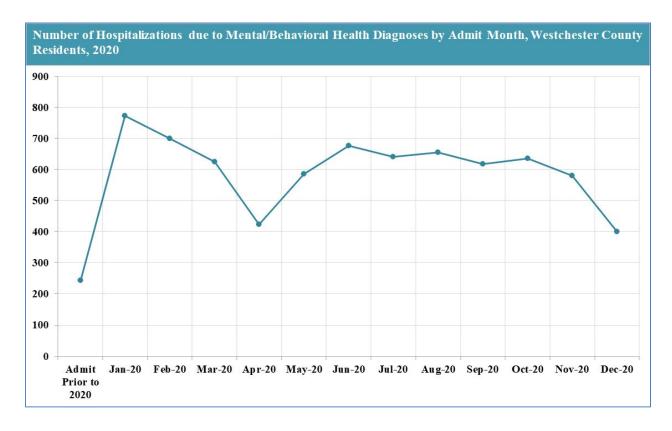
In every racial and ethnic category, most of the mental/behavioral hospitalizations occurred among males, with White or Non-Hispanic individuals continuing to make up the majority.





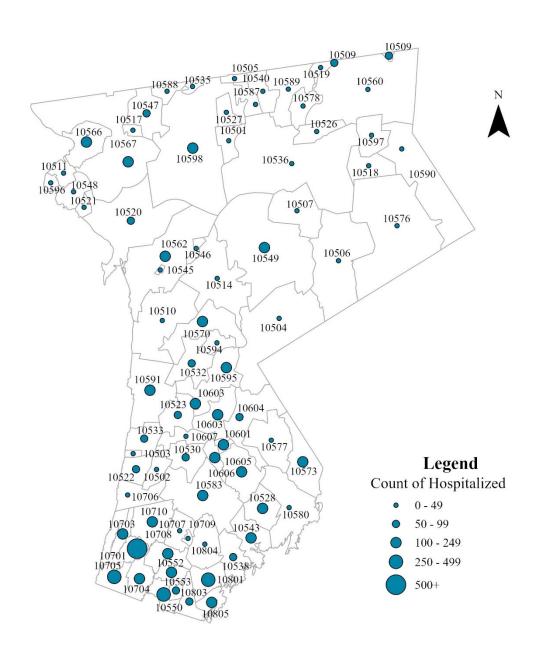
## Monthly Distribution

The overall number of hospitalizations due to mental/behavioral health diagnoses was at its peak during the beginning of the year in January. Aside from lows around the 400s in April and December of 2020, the majority of the year fluctuated around 600 per month.



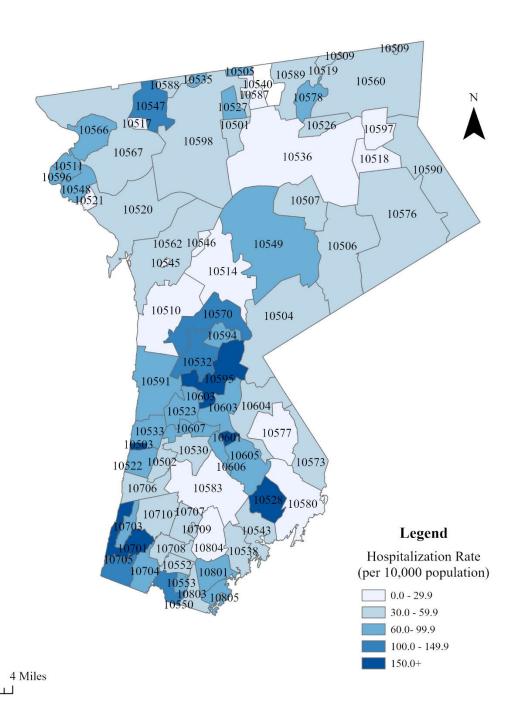
## Geographic Distribution

Number of Hospitalizations due to Mental/Behavioral Health Diagnoses by Patient Residential ZIP Code, Westchester County Residents, 2020



## Geographic Distribution

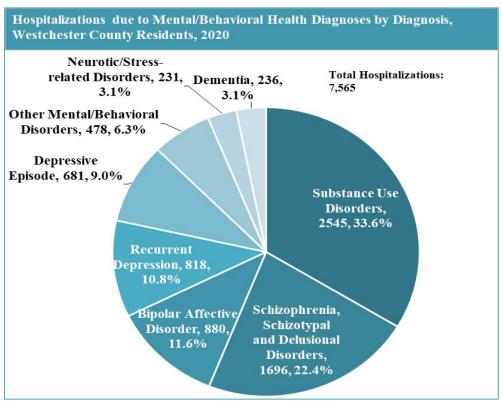
Rate of Hospitalizations due to Mental/Behavioral Health Diagnoses by Patient Residential ZIP Code, Westchester County Residents, 2020

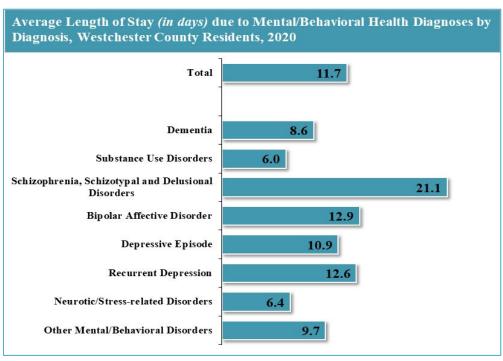


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#### Diagnosis Type

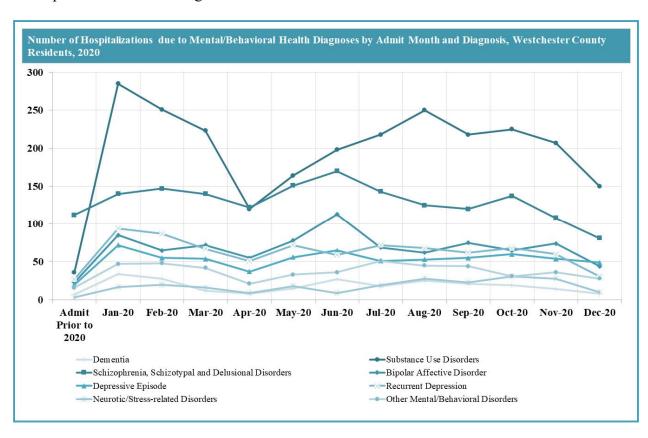
Substance use disorders and schizophrenic/delusional disorders were the top two mental/behavioral health diagnoses resulting in hospitalization in 2020. The overall average length of stay was 11.7 days—which varied by diagnoses type.





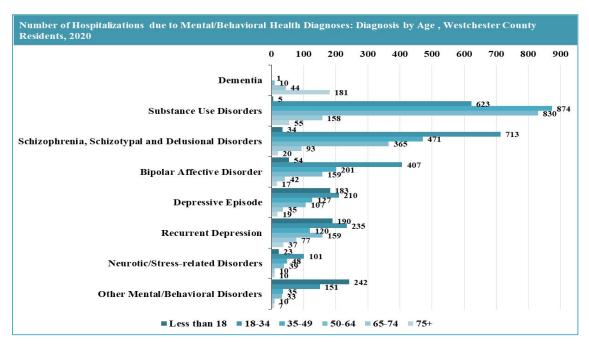
## Monthly Distribution by Diagnosis Type

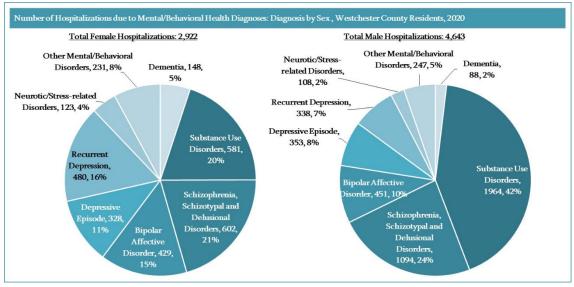
The diagnosis specific trends mimic the overall trend by varying degree of frequency, while continuing to illustrate the two primary drivers of the trend as substance use diagnoses and schizophrenic/delusional diagnoses.



#### Demographics by Diagnosis Type

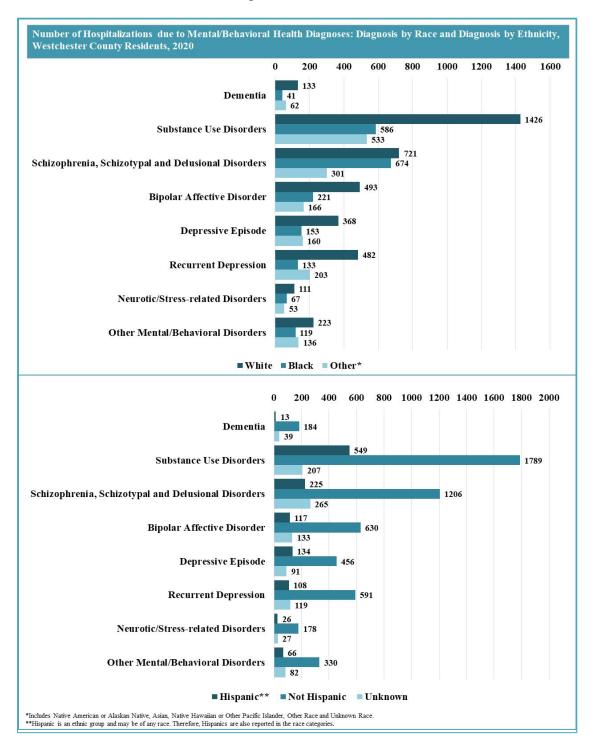
When distributed by age, dementia related hospitalizations were more common among the elderly, schizophrenia and mood diagnoses were more prevalent among younger age groups, and substance use diagnoses affected both the young and middle-aged. While a majority of diagnosis types were with similar patterns among males and females, males had a higher proportion of hospitalizations due to substance use and schizophrenic/delusional diagnoses, and females had a greater proportion of depression hospitalizations.





#### Demographics by Diagnosis Type

White or Non-Hispanic individuals made up the majority of hospitalizations, especially among those admitted for substance use diagnoses.



# Facility Location

Of those hospitalized for mental/behavioral diagnoses, 88.0% occurred in Westchester County facilities, while 12% occurred in facilities located in either New York City or other surrounding counties in New York State.

Distribution of Hospitalizations due to Mental/Behavioral Disorders by Facility, Westchester County Residents, 2020		
Facility Name	Frequency	%
Westchester County		
ST JOSEPH'S MC-ST VINCENTS	1751	23.1%
WESTCHESTER DIVISION		
WESTCHESTER MEDICAL CENTER	1068	14.1%
SJRH - PARK CARE PAVILION	902	11.9%
ST JOSEPH'S MEDICAL CENTER	676	8.9%
NEW YORK PRESBYTERIAN HOSPITAL -	5(7	7.5%
WESTCHESTER DIVISION	567	
PHELPS HOSPITAL	430	5.7%
MONTEFIORE MOUNT VERNON HOSPITAL	396	5.2%
NORTHERN WESTCHESTER HOSPITAL	309	4.1%
WHITE PLAINS HOSPITAL CENTER	218	2.9%
NEWYORK-PRESBYTERIAN LAWRENCE	106	1.4%
HOSPITAL	106	
SJRH - ST JOHNS DIVISION	83	1.1%
NEWYORK-PRESBYTERIAN/HUDSON	75	1.0%
VALLEY HOSPITAL		
MONTEFIORE NEW ROCHELLE HOSPITAL	65	0.9%
Other*	9	0.1%
New York City Counties		
MONTEFIORE MEDICAL CENTER - HENRY &	72	1.0%
LUCY MOSES DIV	73	
JACOBI MEDICAL CENTER	58	0.8%
BRONXCARE HOSPITAL CENTER	49	0.6%
MONTEFIORE MEDICAL CENTER-	40	0.5%
WAKEFIELD HOSPITAL		
SBH HEALTH SYSTEM	35	0.5%
BELLEVUE HOSPITAL CENTER	34	0.4%
MOUNT SINAI BETH ISRAEL	29	0.4%
NEW YORK PRESBYTERIAN HOSPITAL -	27	0.4%
COLUMBIA PRESBYTERIAN CENTER	2.1	
CALVARY HOSPITAL INC	25	0.3%
LONG ISLAND JEWISH MEDICAL CENTER	22	0.3%
Other*	150	2.0%
Other Surrounding NYS Counties		
MONTEFIORE NYACK HOSPITAL	106	1.4%
PUTNAM HOSPITAL CENTER	85	1.1%
MID-HUDSON VALLEY DIVISION OF	71	0.9%
WESTCHESTER MEDICAL CENTER	71	
GOOD SAMARITAN HOSPITAL OF SUFFERN	41	0.5%
Other*	65	0.9%
Note: 'Other' denotes facilities with less than 20 cases per location.		•

#### **Data Notes**

Information on hospitalizations comes from the Statewide Planning and Research Cooperative System (SPARCS) data for the year 2020. SPARCS was implemented by the New York State Department of Health in 1979, with the cooperation and initial financial support of the U.S. Department of Health and Human Services. SPARCS receives, processes, stores, and analyzes inpatient hospitalization data from hospitals in New York State and outpatient data from hospitals with emergency departments, hospitals providing ambulatory surgery services, and all other facilities providing ambulatory surgery services.

To protect patient privacy, any personal identifiers are omitted from the SPARCS data set, such as patient names, individual medical record numbers, and detailed residence addresses. Data reported are the number of cases of diseases or conditions requiring hospitalization, rather than individual patients.

Due to the fact that the SPARCS data is continually being updated, the completeness of reporting by individual facilities varies over time. All SPARCS tables included in this data brief reflect the information as of July 2022.

**Hospitalizations**: Cases admitted to an acute-care hospital. Data are extracted from the inpatient data files.

**Length of Stay:** SPARCS calculates a length of stay for each discharge record by subtracting the date of admission from the date of discharge. If a patient is admitted and discharged the same day, the length of stay is one day.

**Principal Diagnosis:** The principal diagnosis is the condition chiefly responsible for causing the admission of the patient into the hospital for care. Because it represents the reason for the patient's stay and reflects clinical findings discovered during the patient's stay, it may not necessarily have been the diagnosis which represented the greatest length of stay, the greatest consumption of hospital resources, or the most life-threatening condition. It may also differ from the admitting diagnosis.

#### The International Classification of Diseases (ICD-10) for Selected Hospitalizations:

Disease Category	ICD-10 Code
Mental & Behavioral Disorders	F00-F99
Mental Disorders due to Physiological Conditions	F00-F09
Substance Abuse Disorders	F10-F19
Alcohol Related	F10
Opioid Related	F11
Schizophrenia, Schizotypal and Delusional Disorders	F20-F29
Mood Disorders	F30-F39
Neurotic Stress Related Somatoform Disorders	F40-F48
Eating Disorders	F50
Other Mental and Behavioral Disorders	F51-F99