SOME ASPECTS OF PATIENT-FLOW IN THE DUTCHESS COUNTY UNIT, 1960–1963

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When the evaluation studies of the Dutchess County Unit were being planned, it was the consensus that no hypotheses relating movement of patients to the evaluation of the Unit could be stated. Nevertheless, it was felt that while collection of the data needed for testing the hypotheses relating to the effectiveness of the Unit was the primary function of the research group, it was also of importance to monitor and analyze the characteristics of the flow of patients through the Unit. Initially, no predictions were made concerning indices of Unit activity based on these data, such as the admission rate, discharge rate, and average length of stay.

A reporting system was developed by which each major change of status of each patient as he moved on and off the books of the Unit was recorded. For each patient entering the Unit, much of the information on his or her admission form, filled out by the hospital for state use, was recorded. To follow the movement of the patient into and out of the Unit, a transaction record was prepared for each admission, discharge, death, placement on, or return from, convalescent care, family care, leave without consent, and home leave, and transfer to or from another state or state-licensed mental hospital, or the other services of the Hudson River State Hospital. A separate record specifying each transaction and the date on which it occurred was prepared and filed. Thus a sequential record of each patient's experience in the Unit was accumulated, beginning with the admission record of personal and psychiatric characteristics and followed by the record of each transaction during that admission. The discussion to follow is based on the analysis of this file of admission and transaction records covering the first four years of the operation of the Dutchess County Unit, from its beginning in January 1960 to the end of 1963.

The number of patients on the books of the Unit at the end of each year is shown in Table 1 for resident patients and those on extramural care. The percentage distribution of resident patients by age and by diagnosis is given in Appendix Table 1. The census of patients on the books increased during the first three years of operation, followed by a decrease in 1963. The number of resident patients, limited by the number of beds, did not change much during the first three years, being at a maximum of 496 at the end of 1961. Between 1962 and 1963, the census of resident patients dropped by 90, partly as a result of the transfer in November of a group of patients from the Unit to a special

Census on December 31	Total	In Unit	All Patients Convales- cent Care	Family Care	Escape
1960	643	472	123	47	1
1961	750	496	187	66	1
1962	798	485	228	78	7
1963	705	395	197	107	6
			Males		
Census on		In	Convales-	Family	
December 31	Total	Unit	cent Care	Care	Escape
1960	303	233	4 6	24	0
1961	324	229	63	31	1
1962	348	225	79	39	5
1963	327	183	77	63	4
			Females		
Census on		In	Convales-	Family	
December 31	Total	Unit	cent Care	Care	Escape
1960	340	239	77	23	1
1961	426	267	124	35	0
1962	450	260	149	39	2
1963	378	212	120	44	2

TABLE I. CENSUS OF PATIENTS ON THE BOOKS OF THE DUTCHESS COUNTY UNIT AT THE END OF EACH YEAR, BY LOCATION AND SEX TABLE 2. AVERAGE DAILY CENSUS OF RESIDENT PATIENTS IN THE DUTCHESS COUNTY UNIT, BY SEX, AGE, TIME SINCE ADMIS-SION, AND YEAR

Sex, Age,		Nur	nber			Per C	'ent	
and					Y ear			
Time Since Admission	1960	1961	1962	<i>1963</i>	1960	1961	<i>1962</i>	1963
Total	417	476	501	459	100.0	100.0	100.0	100.0
Over 12 months since								
admission	297	337	346	347	71.2	70.8	69.1	75.6
males—under 65	81	98	102	89	19.4	20.6	20.4	19.4
males—65 or over	59	71	65	66	14.1	14.9	13.0	14.4
females—under 65	97	91	80	81	23.3	19.1	16.0	17.6
females-65 or over	60	77	99	111	14.4	16.2	19.7	24.2
Less than 12 months since								
admission	120	139	155	112	28.8	29.2	30.9	24.4
males—under 65	41	37	49	26	9.8	7.8	9.7	5.7
males—65 or over	19	15	19	17	4.6	3.2	3.8	3.7
females—under 65	30	41	41	27	7.2	8.6	8.2	5.9
females—65 or over	30	46	46	42	7.2	9.6	9 .2	9.1

geriatric treatment service established in another part of the Hudson River State Hospital. During this four-year period the census of female patients was higher than that of male patients both in residence and on convalescent care.

The annual average daily censuses of resident patients by age, sex, and length of stay in Table 2 illustrate of one of the major problems faced by the staff of the Unit during this period—the accumulation of long-stay, elderly female patients. The average number of long-stay patients increased from 1960 to 1961 by about 10 per cent, and then increased very slowly during the following years. Long-stay patients constituted about 70 per cent of the total patient load in the Unit from 1960 to 1962 and about 75 per cent in 1963, a result of a decrease in the average number of short-stay patients. In 1960 the elderly females accounted for only about 20 per cent of the total census of long-stay patients, but this increased each year and in 1963 amounted to almost one-third of the total of long-stay patients and almost 25 per cent of the total of all patients in the Unit.

An impression of the volume of patient movement through the Unit may be gained from Table 3 which shows the annual frequencies of admissions, discharges, deaths, and placements to and returns from extramural care. Admissions by age and by diagnosis are given in Appendix Table 2. The 579 admissions during 1961 was the largest annual

suo		D	Discharges	s From Extra-		Deaths	On Extra-	Ч	lacement To Conva-	Placements To Conva- To		Returns From Conva- 1	ns Prom
1st Re- From mural Adm. adm. Total Unit Care*	From Unit		murai Care*	-	Total	In Unit	mural Care*	Total	lescent Care	Family Care	Total	lescent Care	Family Care
					Bc	Both Sexe	20						
270	270		71		84	83	-	253	136	117	153	81	79.
222 347 290	290		57		100	66	1	309	195	114	182	100	5
212 371	298		73		115	110	S	289	186	103	165	64	3 5
158 307 200	200	•••	107		122	119	အ	287	169	118	187	115	22
						Males							
$\begin{array}{cccccccccccccccccccccccccccccccccccc$	182		35		51	51	0	120	49	71	17	35	42
141 222 200	200		22		56	56	0	131	67	64	92	46	46
131 225 192	192		33		48	45	က	122	9 9	56	68	32	36
96 177 135	135		42		44	43	I	149	72	77	89	45	44
						Females							
124 88	88		36			32	Г	133	87	46	76	46	30
183 81 125 90 35	06		35		44	43	1	178	128	50	6	54	36
81 146 106	106		40		67	65	7	167	120	47	97	62	35
130 65	65		65		78	76	3	138	26	41	98	20	28
* Convalescent care, family care, or escape	eape												

TABLE 3. ADDITIONS AND REMOVALS OF PATIENTS IN THE DUTCHESS COUNTY UNIT BY SEX AND YEAR

number during this four-year period, and a sharp decrease in admissions occurred in 1963. This decline amounted to 118 admissions, 91 of which occurred among males. The decrease in male admissions was most pronounced for middle-aged patients and for patients diagnosed as "without psychosis." The program of pre-care may have been one factor in this drop in admissions, and a second was believed to have been the opening of a psychiatric ward in a Poughkeepsie general hospital in 1962. However, analysis of the records of the admissions to this ward during 1963 suggests that its effect on the flow of male admissions to the Unit was not of major importance. During 1963 there were only 48 male admissions to the ward, as compared to the decrease of 91 in the Unit, and most of these were younger patients. Female admissions to the new ward numbered 103 in 1963. Although the tabulation of the 1964 admissions to the Unit are incomplete, it should be noted that they increased to about the level of 1962.

The number of discharges increased during the first three years but decreased in 1963 with the decrease in admissions. Each year the placements to extramural care exceeded the returns by 100 or more. During the period there was an increase in the number of deaths, but it occurred entirely among female patients and appeared to be associated with the increasing number of elderly patients.

The Dutchess County Unit was viewed as a community resource for the hospitalization of persons in the county who became mentally ill. This was interpreted, initially, to mean that anyone requiring hospitalization while in the county would be admitted to the Unit regardless of residence. As a result of this policy, a number of patients were admitted to the Unit during its first years who were not county residents (Table 4). Some of these were transients, mostly alcoholics, with no fixed

TABLE 4. NUMBER OF ADMISSIONS OF NONRESIDENTS OF DUTCHESS COUNTY TO THE DUTCHESS COUNTY UNIT BY SEX AND YEAR

	A Admi			ıles rst ssions	Readm	ission s	A Admis	ll ssions	Fem Fi Admis	rst	I admis	Re- sions
Ycar	Total	Non- D.C.	Total	Non- D.C.	Total	Non- D.C.	Total	Non- D.C.	Total	Non- D.C.	Total	Non- D.C.
1960	296	36	163	15	133	21	213	15	149	6	64	9
1961	315	40	174	17	141	23	264	17	183	9	81	8
1962	314	41	183	24	131	17	241	8	160	5	81	3
196 3	223	7	127	3	96	4	214	6	152	4	62	2

TABLE 5. AGE-ADJUSTED ADMISSION RATES* OF DUTCHESS COUNTY RESIDENTS TO THE DUTCHESS COUNTY UNIT BY SEX AND YEAR

Year	All Patients	Males	Females
1960	260.8	306.8	213.6
1961 1962	$\begin{array}{c} 289.2 \\ 273.3 \end{array}$	$\begin{array}{c} 317.6\\ 306.3 \end{array}$	$\begin{array}{c} 260.8 \\ 235.8 \end{array}$
1963	224.4	238.6	208.0

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* Per 100,000 population; the 1960 census of Dutchess County was the standard population.

residence. Late in 1962, the interpretation of this admission policy was made more rigorous and in 1963 the number of non-Dutchess County admissions to the Unit decreased substantially.

If only residents of Dutchess County admitted to the Unit are considered, the annual age-adjusted admission rates to the Unit can be computed (Table 5). The annual differences observed in the total number of admissions were repeated in these rates, with the maximum admission rate for both males and females occurring in 1961 and the minimum in 1963.

A rate at which patients moved out of the Dutchess County Unit into the community may be computed by relating the number of such releases from the Unit during a given interval to the number of patient-months exeperience of patients in the Unit during that interval. Important variables affecting this rate are age, sex, and time in hospital since admission, and age-adjusted rates of discharge and placement on convalescent care are given in Table 6 and Figures 1–3 for patients of each sex, subdivided by whether admission to the hospital was or was not within the preceding 12 months. The rates expressed as the number of discharges or convalescent care placements per 1,000 patient-months in the Unit, were computed for each six-month period during 1960–1963. The "release" rate, which is computed from the sum of the discharges and convalescent care placements, is also given.

The most conspicuous feature of these data is the sharp difference in rate of return to the community between patients recently admitted and those still in the hospital 12 months after admission. In the latter group, the age-adjusted discharge rate for all patients was under 5 per 1,000 patient-months during the four-year period, while in the former it ranged between 123 and 193. Differences in rate of placement on convalescent care were not so pronounced, but the rate among recent

TABLE 6. A(RESIDENT IN D	GE-ADJUSTED RATES OF UTCHESS COUNTY UNIT	FED RATES COUNTY UN	IS OF DI UNIT BY	DISCHARGE 3Y SEX, TIMI	E AND ME SINC		CONVALESCENT E ADMISSION, AI	r care and sen	PLACEMENT [IANNUAL PE]	MENT F(AL PERI		PATIENTS
	2	Under 12	Under 12 Months Since Admission	ince Adn	vission			Over 12	Months	Over 12 Months Since Admission	Imission	2
	Ъ	Patient Months	ths		Number	r.	Pa	Rate per 1,000 Patient Months	vou uths		Number	
L	Delega	1		7-0.0		Patient		1		1		Patient
reroa	asnatau	DISCN.	د	Disch.	·	MORINS REU	nelease	DISCR.		DISCH.	د	STITLO TAT
						All Fat	lents					
JanJune, 1960	244.0	193.0	51.0	143	33	660.8	16.4	1.3	15.1	7	26	1706.6
July–Dec., 1960	217.2	145.8	71.4	123	61	805.3	15.8	3.4	12.4	9	24	1904.9
Jan.–June, 1961	265.4	186.7	78.7	149	76	863.0	11.9	0	11.9	0	21	2010.5
July-Dec., 1961	249.8	170.3	79.5	137	66	825.4	19.2	2.4	16.8	S	33	2097.1
Jan.–June, 1962	218.5	157.5	61.0	157	65	916.0	15.5	0.9	14.6	7	27	2072.6
	190.4	123.0	67.4	134	68	966.7	19.8	3.4	16.4	9	29	2139.3
Jan.–June, 1963	250.2		99.9	66	67	730.6	26.0	4.5	21.5	×	41	2209.6
July-Dec., 1963	212.8	155.3	57.5	88	40	626.5	19.6	3.9	15.7	5	25	2013.1
						Male Pa	tients					
Jan.–June, 1960	253.4	231.5	21.9	96	6	374.4	15.3	0	15.3	0	12	781.2
	242.8		49.4	82	22	353.0	17.8	4.9	12.9	4	11	927.7
	333.6	260.8	72.8	89	28	309.4	11.4	0	11.4	0	10	1025.1
	349.2	295.4	53.8	110	19	318.9	15.5	4.1	11.4	4	11	1038.6
• •	268.2	230.3	37.9	109	18	396.1	12.4	0	12.4	0	12	1003.9
	200.5	145.5	55.0	82	28	436.7	12.1	2.2	9.9	7	6	1021.5
	325.5	196.8	128.7	68	39	289.3	29.1	8.0	21.1	2	19	982.0
July–Dec., 1963	253.9	220.6	33.3	56	10	237.2	14.6	6.7	7.9	4	S	897.0
						Female F	atients					
JanJune, 1960	231.5	151.6	79.9	47	24	286.4	16.9	2.3	14.6	7	14	925.4
July-Dec., 1960	189.9	96.8	93.1	41	39	452.3	14.4	2.0	12.4	7	13	977.2
Jan.–June, 1961	200.2	113.8	86.4	09	48	553.7	11.8	0	11.8	0	11	985.4
July-Dec., 1961	161.6	51.0	110.6	27	47	506.5	23.5	0.9	22.6	1	52	1058.5
JanJune, 1962	174.7	88.5	86.2	48	47	519.9	18.9	1.5	17.4	63	15	1068.7
July-Dec., 1962	179.6	98.3 102 r	81.3	52	40	530.0	28.3	4.5	53.8 53.8	4,	50	1117.8
Julv-Dec., 1963	174.6	105.0 93.4	81.2	91 32	9 00 1	441.3 389.3	24.2	1.2	23.0 24.0		22	1227.6
										•	2	T .0111
2 6 11'	4; 21	•	101	4	16	10 18	ü		1	15 22 25 75 75 76	10	日 四 二 ?

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admissions was still about four times that observed for patients with longer hospital experience.

Among the more recently admitted patients, the age-adjusted "release" rate was higher for males than for females. The discharge rate for males was usually about twice that for females, while the rate of

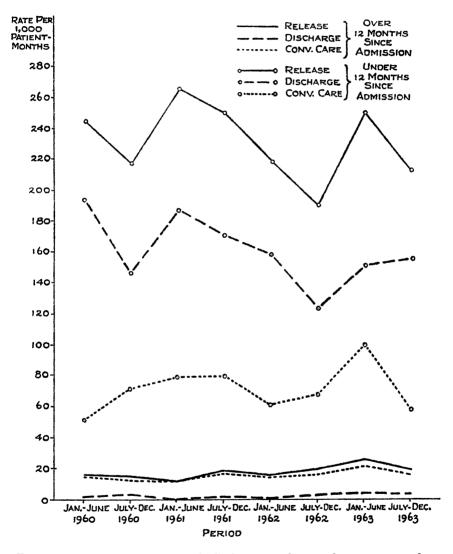


Figure 1. Age-adjusted rates of discharge and convalescent care placement for resident patients in Dutchess County Unit, by time since admission and semiannual period: all patients.

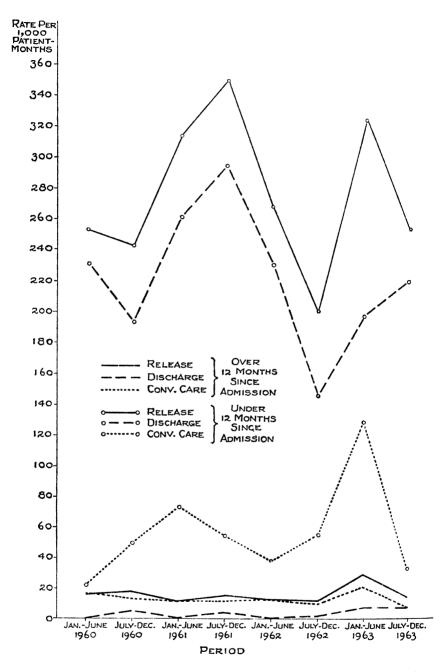


Figure 2. Age-adjusted rates of discharge and convalescent care placement for resident patients in Dutchess County Unit, by time since admission and semiannual period: males.

convalescent care placement was generally higher for female patients. Release by discharge was much more common than release by placement on convalescent care for male patients; but among females, although the discharge rate was usually the higher of the two, the differences were smaller than those observed for males. Among longstay patients the rate of placement on convalescent care was higher than the discharge rate among both males and females.

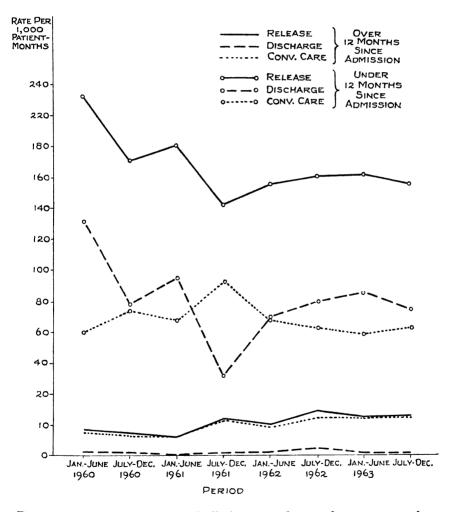


Figure 3. Age-adjusted rates of discharge and convalescent care placement for resident patients in Dutchess County Unit, by time since admission and semiannual period: females.

During the four-year period there were no definite trends in the rates for recently admitted patients. The age-adjusted discharge rate dropped steadily during 1961 and 1962 and rose again in 1963, and this variation was more pronounced among the males. The rate of convalescent care placement of long-stay females almost doubled dur-

TABLE 7. MORTALITY RATES FOR PATIENTS RESIDENT IN DUTCHESS COUNTY UNIT AGED 65 AND OVER, BY SEX, TIME SINCE ADMISSION, AND SEMIANNUAL PERIOD

	De	aths per 1,000	Person-Mo	nths
	Over 12	? Months	Under 1.	ℓ Months
	Since A	dmission	Since A	dmission
Period	Males	Females	Males	Females
Jan.–June 1960	18.7	17.3	124.6	86.8
July–Dec. 1960	17.4	8.0	164.1	28.8
JanJune 1961	13.8	9.4	261.3	48.2
July–Dec. 1961	16.2	13.5	133.7	55.1
Jan.–June 1962	14.9	18.8	146.3	87.2
July–Dec. 1962	5.2	14.3	138.9	65.4
Jan.–June 1963	22.8	17.8	129.2	81.3
July-Dec. 1963	9.9	13.2	108.1	115.8
		Number o	of Deaths	
		? Months	Under 1	
		dmission	Since A	
Period	Males	Females	Males	Females
JanJune 1960	6	6	15	11
July–Dec. 1960	7	3	18	7
Jan.–June 1961	6	4	25	14
July–Dec. 1961	7	7	12	15
Jan.–June 1962	6	11	16	22
July–Dec. 1962	2	9	17	20
Jan.–June 1963	9	12	14	23
July-Dec. 1963	4	9	11	26
		Person-	Months	
		Months	Under 1	e Months
	Since A	dmission	Since A	dmission
Period	Males	Females	Males	Females
Jan.–June 1960	320.4	346.0	120.4	126.7
July-Dec. 1960	401.5	376.1	109.7	242.8
Jan.–June 1961	435.3	424.1	95.7	290.4
July-Dec. 1961	432.5	518.0	89.7	272 .0
Jan.–June 1962	401.6	584.6	109.4	252.4
July-Dec. 1962	385.3	628.8	122.4	305.7
JanJune 1963	395.5	673.1	108.4	282.7
July-Dec. 1963	404.9	681.8	101.7	224.4
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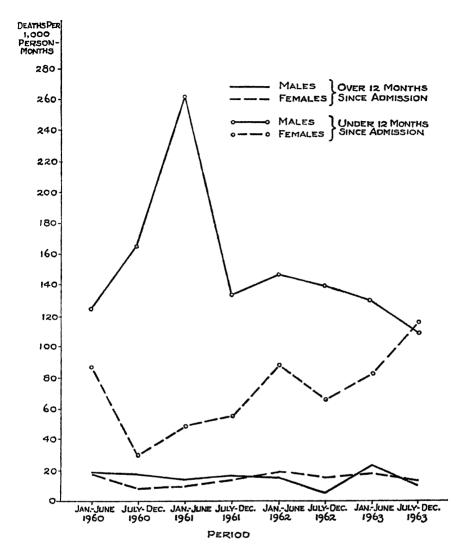


Figure 4. Mortality among patients resident in Dutchess County Unit aged 65 and over, by sex, time since admission, and semiannual period.

ing the latter part of 1961 and maintained the higher level during much of 1962 and 1963.

Mortality differed among the recent admissions over 65 years of age and the long-stay patients in the same pattern as was observed for discharges and convalescent care placement (Table 7 and Figure 4). The mortality rate among the elderly patients admitted more than 12 months earlier was uniformly low over the four-year period, and there was no difference between the rates for male and female patients. Among the newer patients of this age, the mortality rates were consistently higher than those for the long-stay patients. The rates for recently admitted females were lower than those for males until the last six-month period. From the latter half of 1960 mortality among these female patients showed a generally upward trend, while during 1961 and 1962 the rates for males were decreasing.

From this examination of the rates of discharge, placement on convalescent care, and mortality, it seems that after some point in a patient's stay in the hospital, here taken as 12 months, the chance of his leaving the hospital by any method is markedly reduced. The patient settles down and becomes a member of the "chronically hospitalized" population.

One of the major objectives of the Dutchess County Unit was the reduction of such chronic hospitalization among its patients. Although the comparison data needed to estimate whether the Unit was superior to other hospitals in achieving this objective are not presently available — a partial measure—the proportion of admissions continuously retained in the Unit for 12 months can be determined. This is done by following each admission to the first significant release within 12 months of admission. A significant release is here defined as discharge, placement on convalescent care, or death. The experience of all admissions during the period 1960–1962 over the 12 months after admission is summarized in Table 8.

TABLE 8. PER CENT DISTRIBUTION OF ALL ADMISSIONS TO DUTCHESS COUNTY UNIT, 1960–62, BY TYPE OF FIRST SIGNIFICANT RELEASE WITHIN 12 MONTHS OF ADMISSION, SEX, AND AGE

			Males			Females	
	All		Under	65 and		Under	65 and
Type of Release	Patients	Total	65	Over	Total	65	Over
Number of Admissions	1,643	925	710	215	718	441	277
Discharge or C.C.	71.4	76.3	88.4	36.3	65.3	88.7	28. 2
Discharge	52.0	63.6	75.2	25.1	37.2	50.3	16.3
Convalescent care	19.4	12.7	13.2	11.2	28.1	38.3	11.9
Died	12.7	12.1	1.7	46.5	13.2	0.9	32.9
Not released	15.9	11.6	9.9	17.2	21.4	10.4	39.0
Median length of stay (months)	1.55	1.23	1.16	1.56	2.04	1.62	6.21

TABLE 9. PER CENT DISTRIBUTION OF ALL ADMISSIONS TO DUTCHESS COUNTY UNIT, 1960–62, AND PATIENTS RETAINED CONTINUOUSLY FOR 12 MONTHS, BY SEX AND AGE

				Males			Females	
		All Patients	Total	Under 65	65 and Over	Total	Under 65	65 and Over
Admissions	No. %	1,643 100.0	925 56.3	710 43.2	215 13.1	718 43.7	441 26.8	277 16.9
Not released within 12 months	No. 3 %	$\begin{array}{c} 261 \\ 100.0 \end{array}$	107 41.0	70 26.8	$\begin{array}{c} 37\\ 14.2 \end{array}$	$\begin{array}{c} 154 \\ 59.0 \end{array}$	$\begin{array}{c} 46\\ 17.6\end{array}$	$\begin{array}{c} 108\\ 41.4 \end{array}$

During the 12 months after admission 71.4 per cent of the admissions were either discharged or placed on convalescent care; 12.7 per cent died, leaving a residual continuously in the hospital or on family care for one year of 15.9 per cent. This pattern varied considerably with age and to some extent by sex. Of patients under 65 years of age, 88 per cent were released, either by discharge or convalescent care placement, during the first year after admission. However, among males in this age group, 75 per cent were discharged and 13 per cent were placed on convalescent care, while only 50 per cent of the females of this age were discharged and 38 per cent were placed on convalescent care. Mortality was negligible in these patients, and about 10 per cent may be considered to have become cases of chronic hospitalization.

Patients over 65 years of age experienced a mortality of 46 per cent among males and 33 per cent among females during the follow-up period, and a larger proportion of males was released (36 per cent) than of females (28 per cent). The residual among females over 65 years old after a year was 39 per cent of the entering cohort, while for males it was only 17 per cent.

The outcome of these differential release and mortality rates acting on the original cohorts of admission was that 261 of the 1,643 admissions during the three-year period (1960–1962) were retained continuously in the hospital for at least 12 months. The composition by age and sex of this residual group is shown in Table 9. Of these 261 patients, 108, or 41 per cent, were elderly females. While the percentage of males under 65 years of age retained continuously was low, the fact that this was the largest of the four groups of admissions resulted in a relatively large numerical contribution from the younger males to the population of long-stay patients. Seventy, or 27 per cent, of the 261 patients were from this group of admissions. The number of elderly males who were retained for 12 months was about proportional to their number of admissions, and the younger females constituted 18 per cent of the residual group.

The cumulative monthly attrition of release and mortality on the cohort of admissions is given in Table 10 and Figures 5–7 for the four groups of patients classified by age and sex. Among the younger patients almost all releases (discharges or convalescent care placements) occurred within five months of admission. During this interval releases were more frequent among males than females, a reflection of the more frequent release by discharge among the males, since discharges tended to take place sooner after admission than did placements on convalescent care. Most of the smaller, but not insignificant, proportion of releases of patients over 65 years of age occurred within three months of admission.

Mortality among admissions was confined almost entirely to patients over 65. Half the male deaths and about a third of the deaths of females were during the first month following admission. At each month during the year the cumulative mortality was substantially greater among the older male patients than it was among females.

TABLE 10. PER CENT OF ADMISSIONS TO DUTCHESS COUNTY UNIT, 1960–62, RELEASED, DEAD, OR STILL IN HOSPITAL AT EACH MONTH AFTER ADMISSION, BY SEX AND AGE

			Ma	mth After	• Admis	sion				
					1	Released	(Dischar	g e		
Months	Con	tinuously	y in Hos	pital		r C.C. F	Placemen	t)	D	ead
After	Under	65 Yrs.	65 Yrs.	& Over	Under	65 Yrs.	65 Yrs.	& Over	65 Yrs.	& Over
Admission	Male	Female	Male	Female	Male	Female	Male	Female	Male	Female
Number of										
Admissions	710	441	215	277	710	441	215	277	215	277
1	53.9	67.6	60.9	77.6	45.4	31.7	14.4	10.8	24.7	11.6
2	28.9	39.2	41.4	68.2	70.0	59.9	26.0	16.6	32.6	15.2
3	21.5	28.6	32.6	61.0	77.2	70.5	31.6	20.6	35.8	18.4
4	17.2	22.7	29.3	56.0	81.5	76.4	31.6	23.5	39.1	20.6
5	15.4	17.0	26.0	52.0	83.1	82.1	33.5	24.5	40.5	23.5
6	13.9	15.4	23.3	50.5	84.4	83.7	34.0	25.6	42.8	23.8
7	12.5	14.5	22.8	48.0	85.8	84.6	34.4	27.4	42.8	24.5
8	11.5	12.7	22.3	45.1	86.8	86.4	34.9	27.4	42.8	27.4
9	10.7	12.0	20.0	43.7	87.6	87.1	34.9	27.8	45.1	28.5
10	10.4	11.3	19.1	42.2	87.9	87.8	35.3	28.2	45.6	29.6
11	10.3	10.7	17.7	40.8	88.0	88.4	36.3	28.2	46.0	31.0
12	9. 9	10.4	17.2	39.0	88.5	88.7	36.3	28.2	46.5	32.9

Cumulative Per Cent with Given Status at Each Month After Admission

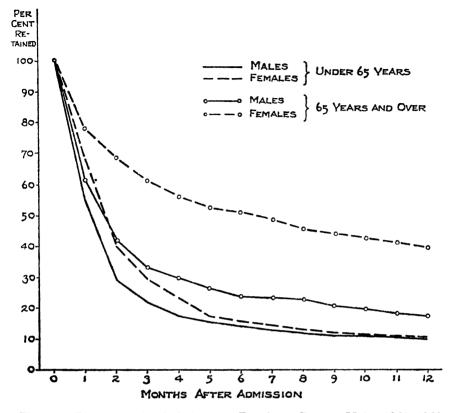


Figure 5. Per cent of admissions to Dutchess County Unit, 1960–1962, retained continuously in hospital at each month after admission, by sex and age.

Continuous retention at each month after admission was conspicuously more prevalent among older females. The higher release and mortality rates among older males, compared to the females, resulted in rates of retention at each month only slightly higher than observed for the younger patients. The rates for these two younger groups of admissions were, disregarding the minor effect of mortality, the complement of those of release and dropped sharply during the first five or six months after admission. At six months, only 15 per cent of these patients had been retained continuously in the hospital, and there was a gradual decrease during the second half of the year to the 10 per cent retained for a year.

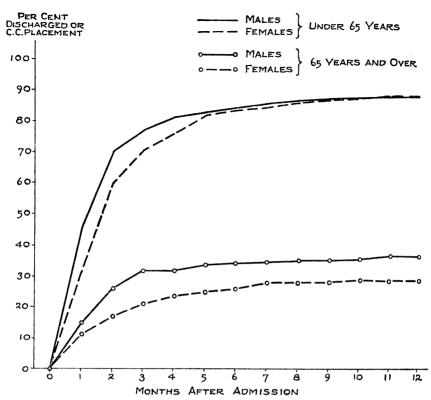


Figure 6. Per cent of admissions to Dutchess County Unit, 1960-1962, released (discharge or convalescent care placement) at each month after admission, by sex and age.

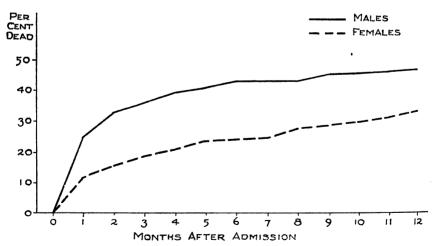


Figure 7. Per cent of admissions to Dutchess County Unit, 1960-1962, aged 65 and over, dead at each month after admission, by sex.

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TABLE II. PER CENT OF RELEASES FROM DUTCHESS COUNTY UNIT, JANUARY 1960-JUNE 1962 ON SPECIFIED STATUS AT IN-TERVALS AFTER RELEASE, BY SEX AND TYPE OF RELEASE

		1 Mor	nth	12 Mor	nths	18 Mor	nths
Type of		Not	On	Not	On	Not	On
Release	No.	Returned	C.C.	Returned	C.C.	Returned	C.C.
				Male	28		
Total	699	69.5	21.5	70.0	15.5	71.7	12.4
Discharge	526	92.0	0	88.0	2.7	86.1	3.2
C.C. placement	173	1.2	85.5	15.0	54.3	27.7	40.5
				Fema	les		
Total	532	42.3	50.8	41.9	41.4	51.7	31.8
Discharge	237	94.5	0	82.3	8.4	82.3	7.6
C.C. placement	295	0.3	91.5	9.5	67.8	27.1	51.2

The experience of patients returned to the community, either by discharge or convalescent care, may be followed to determine outcome of release (Table 11). This table shows the proportion of the patients released during the first two and one-half years of the Unit's operation who had not returned¹ to the Unit or were on convalescent care at one, 12 and 18 months after release.

Between 5 and 8 per cent of the discharged patients were readmitted to the Unit within a month of discharge, but after this initial attrition of the discharged patients, return was rare. At 12 and 18 months, about 88 per cent of the male discharges had not returned to the Unit, and 3 per cent had returned and been placed on convalescent care. Among discharged females also, 90 per cent were in the community, but of these 82 per cent had not returned to the Unit and 8 per cent were on convalescent care.

As might be expected, patients placed on convalescent care returned more often than did those discharged. One month after placement on convalescent care, 13 per cent of the male patients were back in the Unit and 8 per cent of the females. At 12 months, almost 70 per cent of the male placements were still in the community, 15 per cent of them after being discharged and 54 per cent remaining on convalescent care. For female patients sent on convalescent care, these percentages were 9 and 68, so that over 75 per cent were still out of the hospital after a year. Approximately one year after convalescent care placement, a decision is made as to whether a patient should be continued on convalescent care or discharged. As a result there was an increase at 18 months after placement in the percentage discharged. Among both male and female patients, this was about 27 per cent of the original group of placements. Among males 40 per cent remained on convalescent care at 18 months and among females, over 50 per cent. Thus 18 months after convalescent care placement, almost 70 per cent of the males and almost 80 per cent of the females were still in the community.

REFERENCE

¹ It should be noted that if a patient is discharged we take no account of his readmission to a hospital except to the Dutchess County Unit, i.e., some patients shown as still discharged in Table 11 may have been readmitted to another institution.

APPENDIX TABLE I. PER CENT DISTRIBUTION OF CENSUS OF RESIDENT PATIENTS IN DUTCHESS COUNTY UNIT AT THE END OF EACH YEAR, BY AGE AND BY DIAGNOSIS

			Age			1	Diagnosis	3	
							Alco- holic	All Other	Non-
	No. of	Under		65 &	Schizo-		Psy-	Psy-	Psy-
Year	Patients	45	45–64	Over	phrenia	CAASP*	choses	choses	chotic
					All Patier	nts			
1960	472	19.3	38.1	42.6	36.9	26.9	4.9	22.9	8.5
1961	496	22.0	34.3	43.7	34.7	28.4	4.8	23.6	8.5
1962	485	16.3	34.0	49.7	32.0	33.8	4.9	23.5	5.8
1963	395	18.2	37.7	44.1	36.7	26.8	5.6	24.8	6.1
				N	Iale Patie	ents			
1960	233	18.9	42.1	39.0	36.1	22.3	8.2	22.3	11.2
1961	229	23.1	40.6	36.3	38.9	19.7	9.2	24.0	8.3
1962	225	19.6	40.9	39.5	38.7	22.7	9.8	22.7	6.2
1963	183	15.3	39.9	44.8	35.0	26.8	11.5	21.3	5.5
				Fe	male Pat	ients			
1960	239	19.7	34. 3	46.0	37.7	31.4	1.7	23.4	5.9
1961	267	21.0	28.8	50.2	31.1	36.0	1.1	23.2	8.6
1962	260	13.5	28.1	58.4	26.2	43.5	0.8	24.2	5.4
1963	212	20.8	35.8	43.4	38.2	26.9	0.5	27.8	6.6

* Cerebro-arteriosclerotic and senile psychoses.

APPENDIX TABLE 2. PER CENT DISTRIBUTION OF ADMISSIONS TO DUTCHESS COUNTY UNIT, BY AGE AND BY DIAGNOSIS

			Age			I	Diagnosis Alco- holic	All Other	Non-	
	No. of	Unde r		65 &	Schizo-		Psy-	Psy-	Psy-	
Year	Patients	45	45-64	Over	p hren ia	CAASP*	c hoses	choses	chotic	
	First Admissions—Males									
1960	163	35.6	30.1	34.3	6.1	30.7	13.5	17.8	31.9	
1961	174	39.1	22.4	38.5	5.2	31.6	12.6	19.5	31.0	
1962	183	41.0	31.7	27.3	9.3	26.2	13.1	13.1	38.3	
1963	127	3 5. 4	29.9	34.6	12.6	34.6	15.0	11.0	26.8	
		First Admissions—Females								
1960	149	30.2	22.8	47.0	12.8	42.3	4.7	21.5	18.8	
1961	183	33.9	19.7	46.4	9.3	44.3	0.5	16.4	29.5	
1962	160	33.1	13.8	53.1	8.1	51.3	0.6	16.2	23.8	
1963	152	29.6	17.8	52.6	10.5	51.3	1.3	14.5	22.4	
		Readmissions—Males								
1960	133	34.6	56.4	9.0	10.5	7.5	32.3	14.3	35.3	
1961	141	40.4	49.6	9.9	8.5	5.7	27.0	8.5	50.4	
1962	131	38.2	49.6	12.2	13.7	6.1	32.1	17.6	30.5	
1963	96	54.2	36.5	9.4	16.7	2.1	34.4	8.3	38.5	
		Readmissions-Females								
1960	64	53.1	31.3	15.6	28.1	7.8	4.7	28.1	31.3	
1961	81	46.9	39.5	13.6	27.2	11.1	12.3	25.9	23.5	
1962	81	56.8	23.5	19.8	23.5	13.6	9.9	25.9	27.2	
1963	62†	53.2	30.6	16.1	24.2	9.7	6.5	33.9	24.2	

* Cerebro-arteriosclerotic and senile psychoses. † One case with diagnosis unknown.