

**Mental Health Professionals in Delaware
2005**

prepared for

**Delaware Department of Health and Social Services
Division of Public Health**

by

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Overview

In 2005, Delaware's Division of Public Health began an effort to measure the number and spatial distribution of mental health professionals practicing in Delaware. Through collaboration with the Delaware Division of Professional Regulation, all mental health professionals licensed to practice in Delaware received a survey. This included all licensed psychiatrists, psychologists, social workers, and professional counselors of mental health and chemical dependency care specialists. Mental health professionals who did not respond to the initial mail survey received three additional mailings in an attempt to boost the response rate.

A total of 1,050 mental health professionals were contacted. The response rate for the survey was 55.4%. Based on the results, which were adjusted for non respondents, the number of mental health professionals with an active practice in Delaware is approximately 763¹. This total is used to produce all estimates presented throughout this report. The data on mental health professionals is separated into the following two subgroups for the purposes of this report: psychiatrists and mental health specialists. Psychiatrists include all who indicated their mental health profession as a psychiatrist. Mental health specialists include psychologists, social workers, and professional counselors of mental health/chemical dependency care specialists.

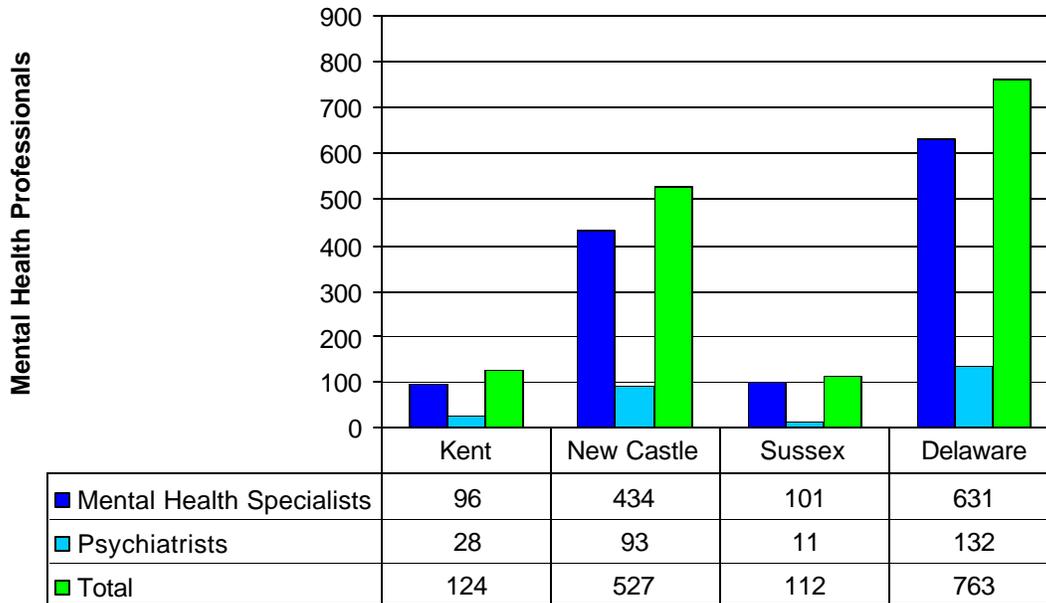
As the survey responses indicated that not all mental health professionals deliver direct patient care on a full-time basis, a full-time equivalent (FTE) was calculated. In accordance with federal regulations, a mental health professional engaged in delivering care directly to patients 40 or more hours per week was defined as a full-time physician. A mental health professional working less than 40 hours was considered as less than full-time (for each four hours less than 40 hours, 0.1 FTE was deducted).² In other words, a mental health professional delivering 50 hours per week of primary care was counted as 1.0 FTE. A mental health professional working 36 hours per week was counted as 0.9 FTE. This methodology is in accordance with the federal guidelines for calculating provider capacity and shortage designations.

¹ On occasion, the data in the tables may not add to the total of 763 mental health professionals because not all respondents provided information for all questions.

² Federal Register/Vol.45, No.223/ Monday, November 17, 1980, Part IV Department of Health and Human Services, 42 CFR Part 5, p.76002.

In addition to the supply of the mental health professionals, this report provides demographic information, practice characteristics, and the spatial distribution of the mental health professionals at the sub-county level.

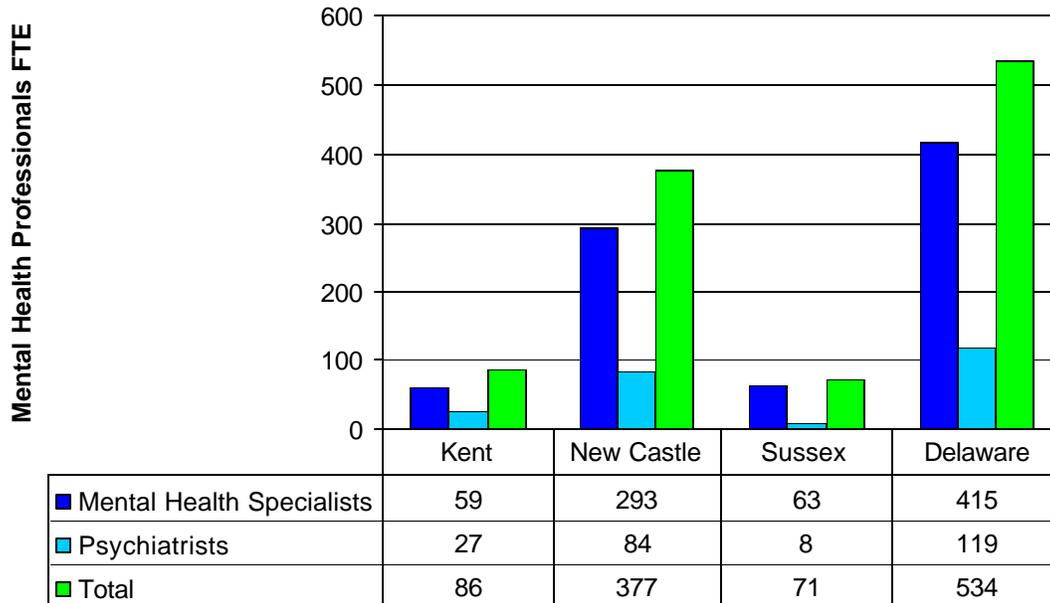
Figure 1.1
Mental Health Professionals by County



Source: Center for Applied Demography & Survey Research, University of Delaware

Figure 1.1 summarizes the mental health professionals in Delaware by county of practice. The proportion of psychiatrists to all mental health professionals is similar in Kent and New Castle counties with 23% and 18% respectively. The proportion is significantly lower in Sussex County at 10%. The overall proportion of psychiatrists to all mental health professionals in the State of Delaware is 17%.

Figure 1.2
Full-time Equivalent Mental Health Professionals
by County



Source: Center for Applied Demography & Survey Research, University of Delaware

The number of full-time equivalent mental health professionals is provided in Figure 1.2. Given Delaware's population of 843,782³, the statewide ratio of psychiatrist to population is 1:7,075 persons. The estimates are 1:5,146 for Kent County and 1:6,253 for New Castle County. Sussex County has a significantly higher ratio of 1:22,983 persons served by each FTE psychiatrist.

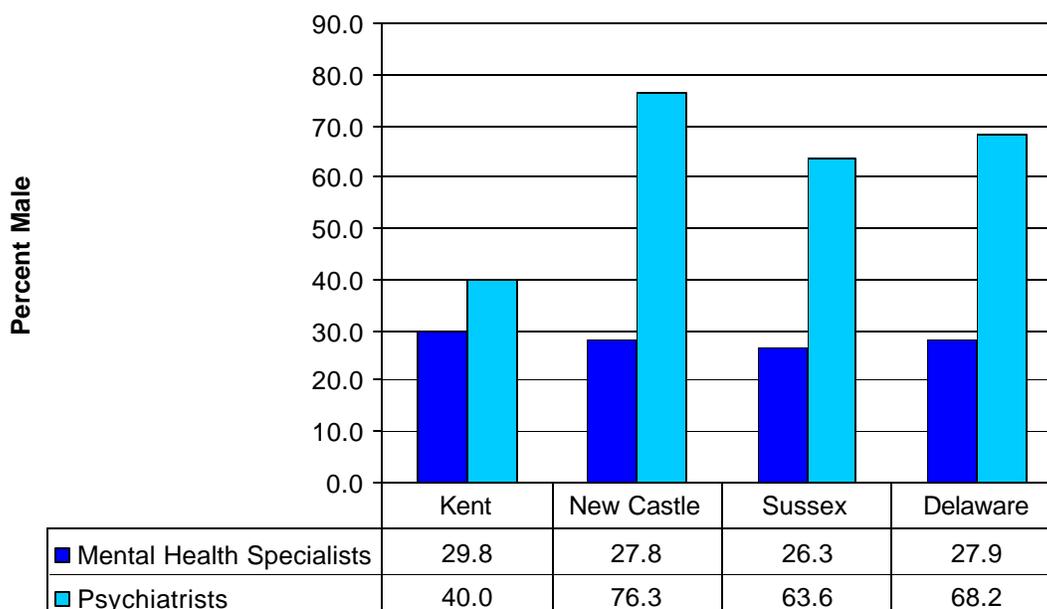
Although there are no overall standards for mental health specialists relative to the population, it appears the ratios are more balanced than for psychiatrists. The statewide ratio of each FTE mental health specialist is 1:2,000 persons. The Kent County ratio of mental health specialists to population is 1:2,409 persons; the Sussex County ratio is 1:2,802, and New Castle County had the most favorable ratio with 1:1,786 persons.

³ Center for Applied Demography, Population projection at Census County Division level, 2005

Demographics

The topic of demographic diversity within the mental health profession community is important as changes occur in the population of Delaware.

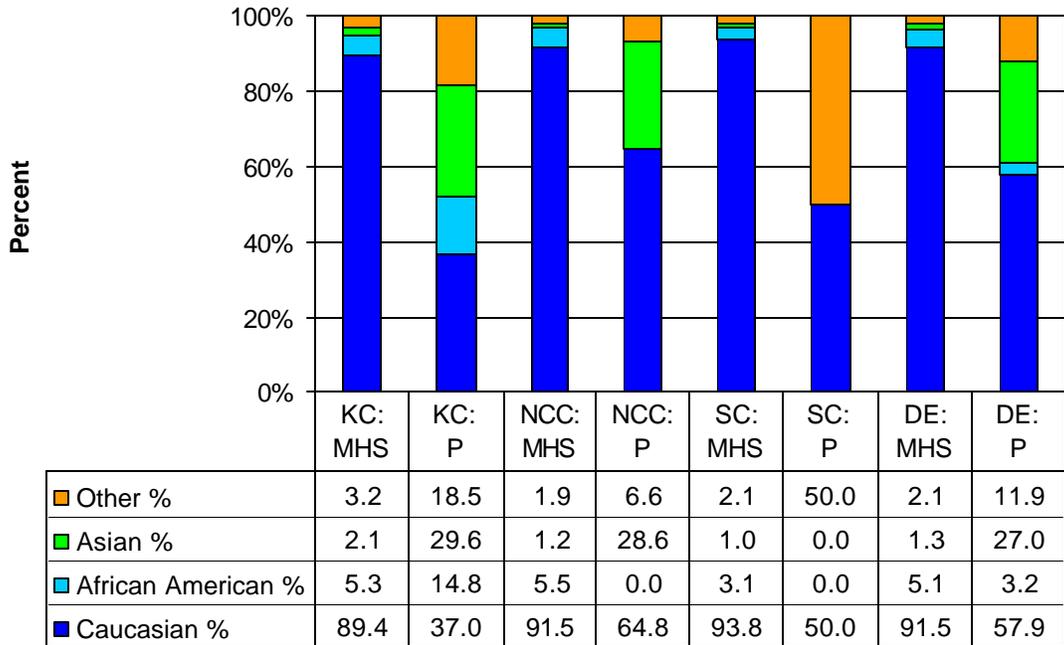
Figure 2.1
Gender of Mental Health Professionals
by County



Source: Center for Applied Demography & Survey Research, University of Delaware

The psychiatrist community in Delaware is about 70% male. There is, however, some variation between the counties. New Castle County (76%) and Sussex County (64%) both have significantly more male psychiatrists than does Kent County (40%). A very different pattern appears among mental health specialists across the state where only 28% is male. The variation of males among mental health specialists across counties is less pronounced with a range of 26% in Kent County to 30% in New Castle County.

Figure 2.2
Race of Mental Health Professionals
by County

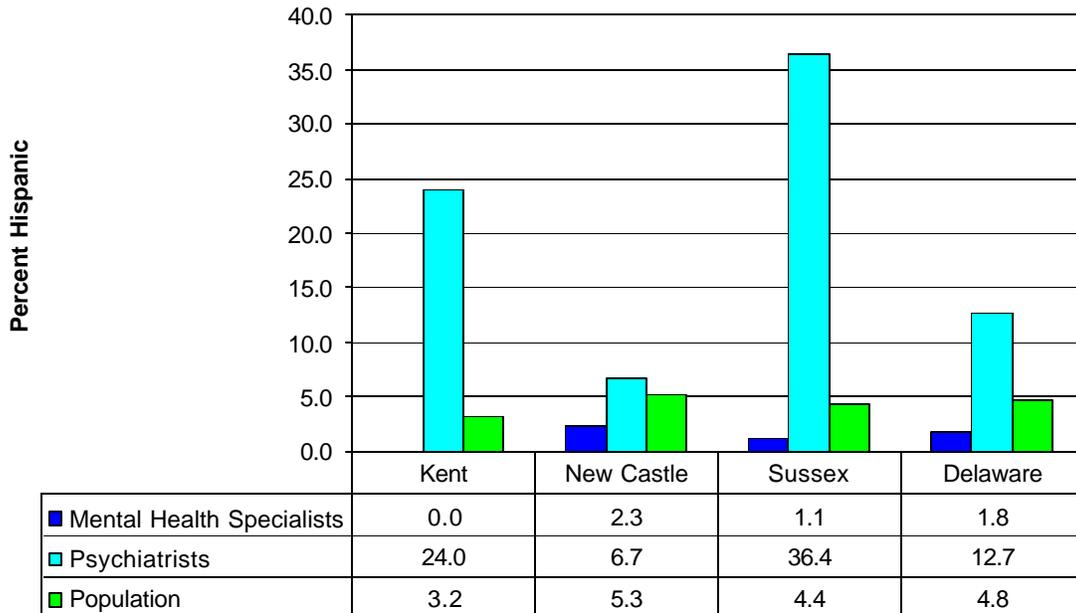


Source: Center for Applied Demography & Survey Research, University of Delaware

The racial distribution of mental health professionals by county is shown in Figure 2.2. There are no African American psychiatrists reported in New Castle County or Sussex County. There are few African American mental health specialists in Sussex County (3%) and the preponderance of Asian psychiatrists in Kent (30%) and New Castle (29%) counties. The scarcity of African American mental health specialists in Sussex County, and the lack of African American psychiatrists in New Castle and Sussex counties is puzzling.

Hispanic origin has taken on a particular interest in Delaware with the rapid growth of that population in the 1990s, particularly in Sussex County. The distribution of mental health professionals by Hispanic origin is found in Figure 2.3.

Figure 2.3
Hispanic Origin of Mental Health Professionals
by County



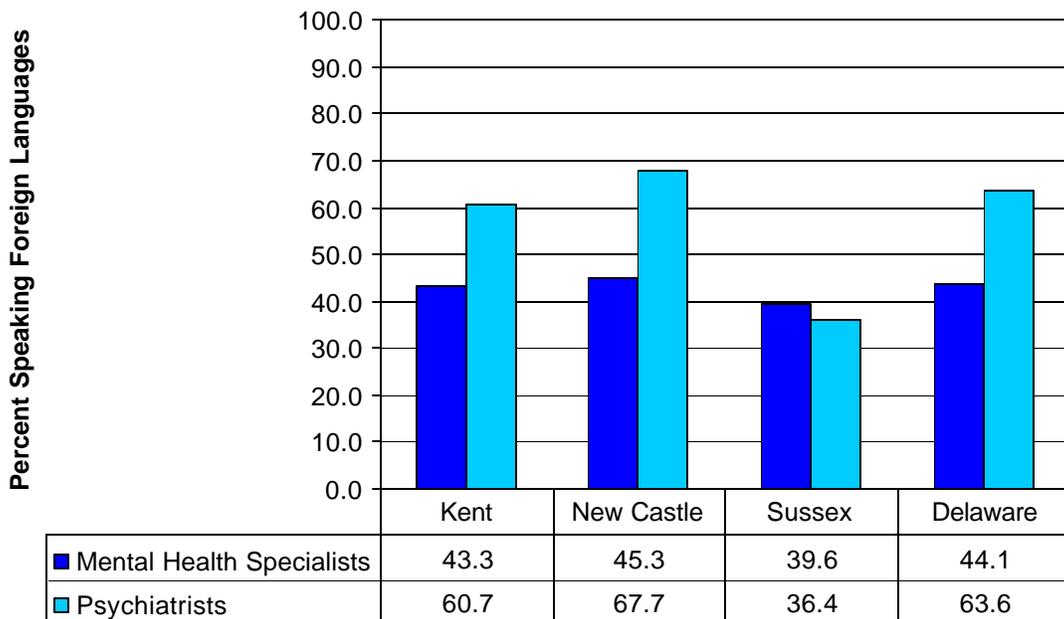
Source: Center for Applied Demography & Survey Research, University of Delaware

Delaware’s population is nearly 5% Hispanic, and the overall Hispanic mental health professionals essentially mirror that population. However, significant differences exist between psychiatrists and mental health specialists, and across counties. The highest proportion of Hispanic psychiatrists is found in Sussex County (36%), the smallest proportion of psychiatrists is found in New Castle County (7%). There are no Hispanic mental health specialists reported in Kent County.

The population of Delaware is becoming more diverse. For example, there has been a significant increase in the number of Hispanic Delawareans, particularly in Sussex County. For many, English is a second language or is not spoken at all. This presents a challenge for the mental health community as they try to provide service to this population. Respondents were asked if languages other than English were spoken at their practice site. The results are detailed in Figure 2.4.

Across the state, 64% of psychiatrists and about 44% of mental health specialists have someone in their office who can speak a language other than English. Sussex County’s psychiatrists and mental health specialists are least likely to have the capability to communicate in a language other than English. Spanish was by far the most frequently mentioned language. Thirty eight percent of Delaware’s mental health professionals indicated that someone in their office spoke Spanish. The ability to communicate in Spanish by someone in the office was indicated by 35% of mental health professionals in Kent County, 40% of mental health professionals in New Castle County and 36% by mental health professionals in Sussex County. Ability to communicate using sign language was indicated by 9% of Delaware’s mental health professionals. Asian languages are spoken by 8% of the mental health professionals; French is spoken by 6% and Arabic by 2%. Seven percent of mental health professionals indicated ability to communicate using other languages.

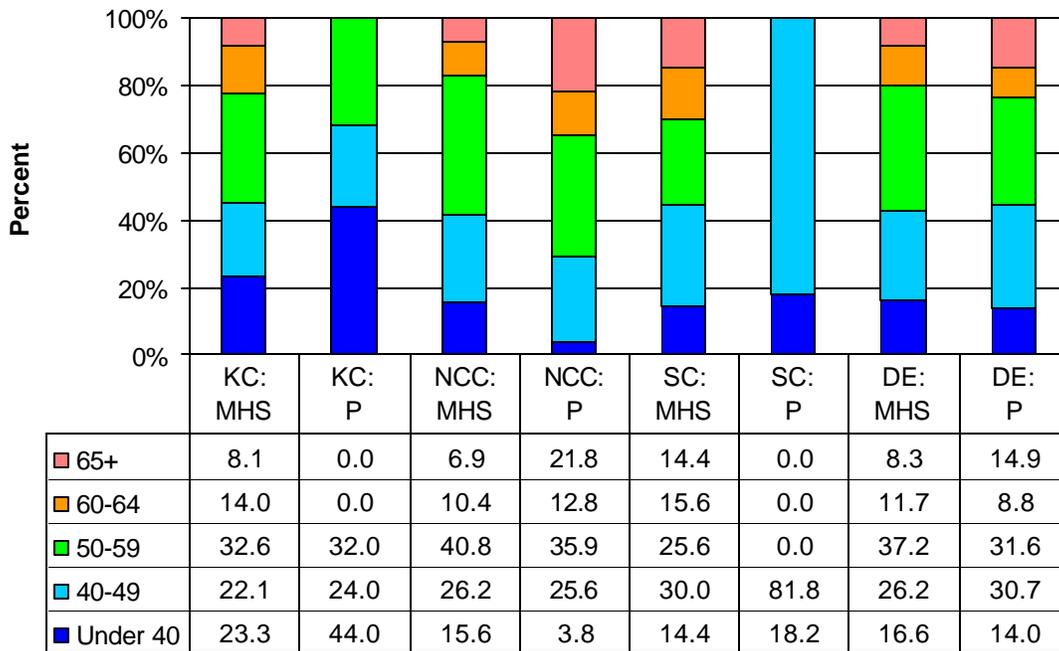
**Figure 2.4
Languages Spoken
by County**



Source: Center for Applied Demography & Survey Research, University of Delaware

The age of mental health professionals is ultimately a factor in their availability. The age distribution of mental health professionals is found in Figure 2.5. There are several points of interest in this display. First, the smallest proportion of psychiatrists under 50 is found in New Castle County (29%). In Delaware, about 45% of psychiatrists are under the age of 50. Second, the highest proportion of psychiatrists aged 60 and above is again in New Castle County (35%), while no psychiatrists are reported for this age group in Kent and Sussex counties. Third, Sussex County, the fastest growing county with the oldest residents on average, has the highest proportion (30%) of mental health specialists 60 and older. Overall, in Delaware, about 20% of mental health specialists are 60 and older.

Figure 2.5
Age of Mental Health Professionals
by County

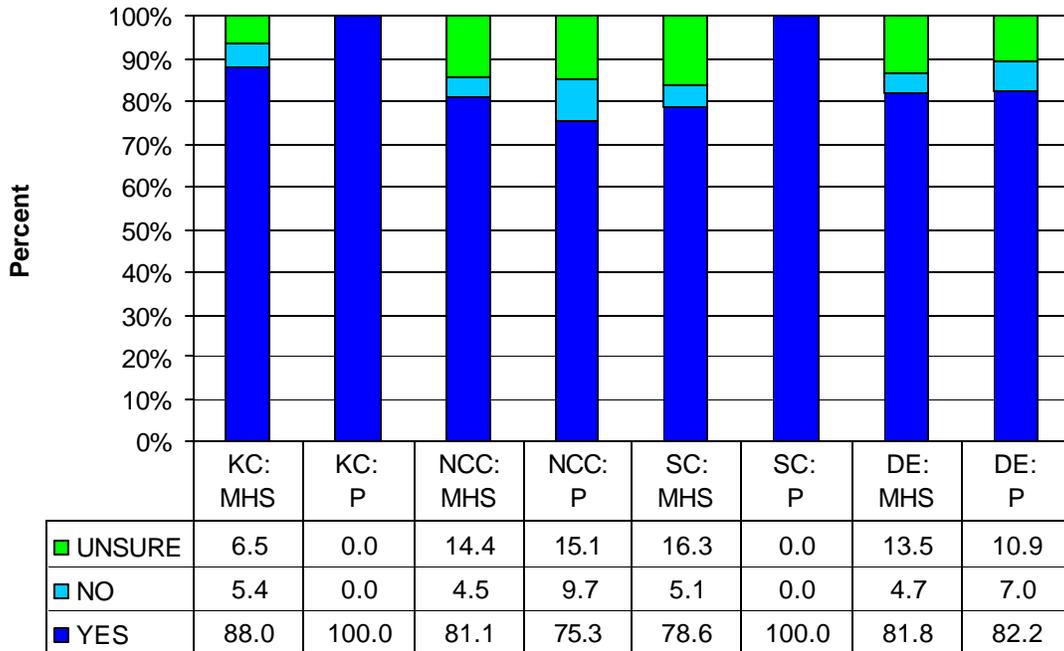


Source: Center for Applied Demography & Survey Research, University of Delaware

Mental health professionals were asked if they planned to be active in their chosen profession five years from now. Those answers are summarized in Figure 2.6 below. In general, 82% of mental health professionals expect to be active in five years. The lowest proportion is found among psychiatrists in New Castle County (75%).

The 40-49 age group has the highest proportion (95%) of mental health professionals indicating that they will be active in the next 5 years. That proportion drops to 87% for the 50-59 age group, 67% for those between the age of 60-64 and 44% for those already of age 65 and over.

Figure 2.6
Active Five Years from Now
by County



Source: Center for Applied Demography & Survey Research, University of Delaware

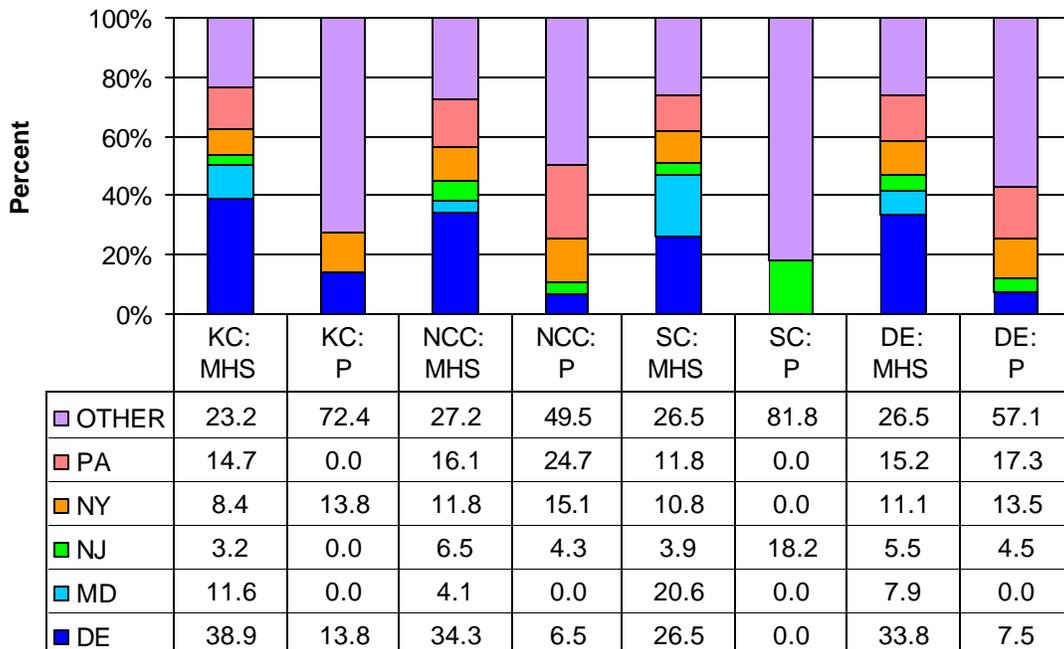
The data for New Castle County shows a large group of psychiatrists and mental health specialists who are unsure about whether they will remain active in five years. Increased levels of uncertainty can also be observed in Sussex County among mental health specialists. This undoubtedly relates to the large group in the 60-64 and 65+ age groups shown in Figure 2.4. In contrast, psychiatrists and mental health specialists in Kent County are more positive and less unsure than those practicing in the other counties. These results serve to increase the concern about the aging of both psychiatrists and mental health specialists in New Castle County and the future adequacy of mental health specialists in Sussex County.

It is necessary to analyze why some mental health professionals choose to practice in Delaware and some choose other states. The way this choice is made determines the adequacy

of the supply for serving Delaware’s residents. Several factors determine this choice. The first factor is where a mental health professional originally resides as indicated by the state from which they graduated high school. The second factor is the state the mental health professional attended college/university.

Figure 2.7 shows the distribution of the state of mental health professionals’ high school graduation. The first interesting aspect of this figure is that 68% of Delaware’s mental health professionals grew up in the region and about 29% are from Delaware. While about 34% of the mental health specialists are from Delaware, only 7.5% of psychiatrists are from Delaware. Pennsylvania is the main source of psychiatrists with 17%, New York provides 13.5% and Delaware provides 7.5%. The second interesting aspect of the figure is that about 57% of all psychiatrists in Delaware come from high schools outside of the region while only 26.5% of mental health specialists come from outside the region.

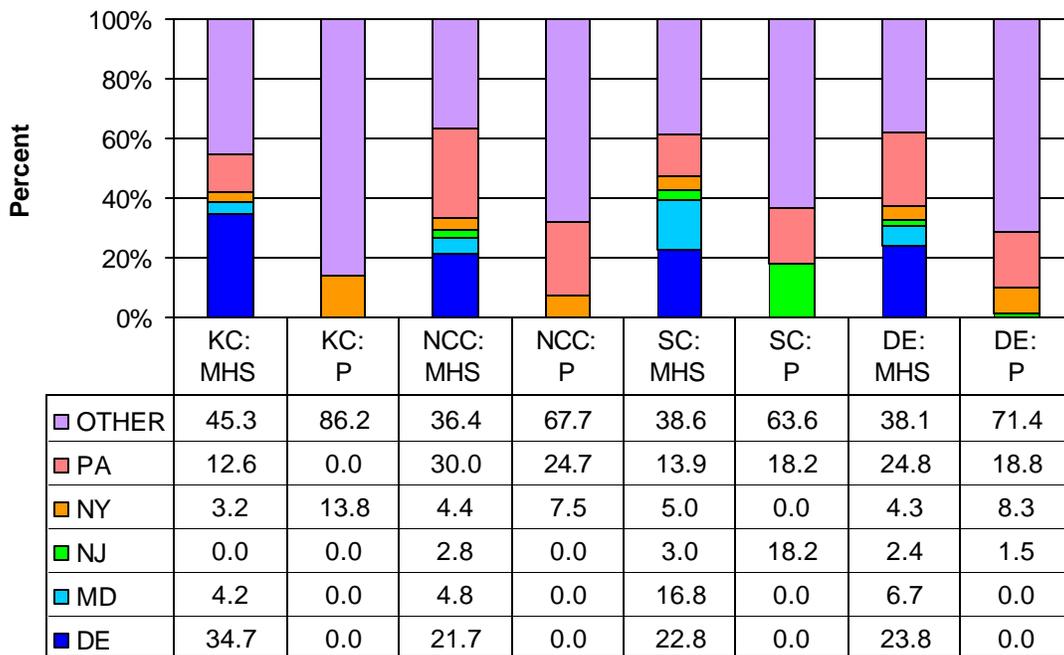
Figure 2.7
State of High School Graduation
by County



Source: Center for Applied Demography & Survey Research, University of Delaware

There appears to be a significant orientation to locate in a specific county depending on the state of high school graduation. Mental health professionals who grew up in Maryland are more likely to locate in Sussex County while those who grew up in New Jersey, New York and Pennsylvania tend to locate in New Castle County. This holds true for both psychiatrists and mental health specialists.

Figure 2.8
State of College/University Graduation
by County



Source: Center for Applied Demography & Survey Research, University of Delaware

The pattern observed for the state of high school graduation is replicated in part for the state of university/college graduation (Figure 2.8). Overall, 56% of Delaware’s mental health professionals graduated from colleges/universities in the region. About 19% of mental health professionals graduated from a college/university in Delaware. The majority of Delaware’s psychiatrists (71%) graduated from colleges/universities outside of the region. As far as the regional source of psychiatrists in Delaware’s counties is concerned, the highest proportion of psychiatrists in Kent County (14%) graduated from a college/university in New York, Sussex County’s psychiatrists (18%) graduated from a college/university in New Jersey and Pennsylvania

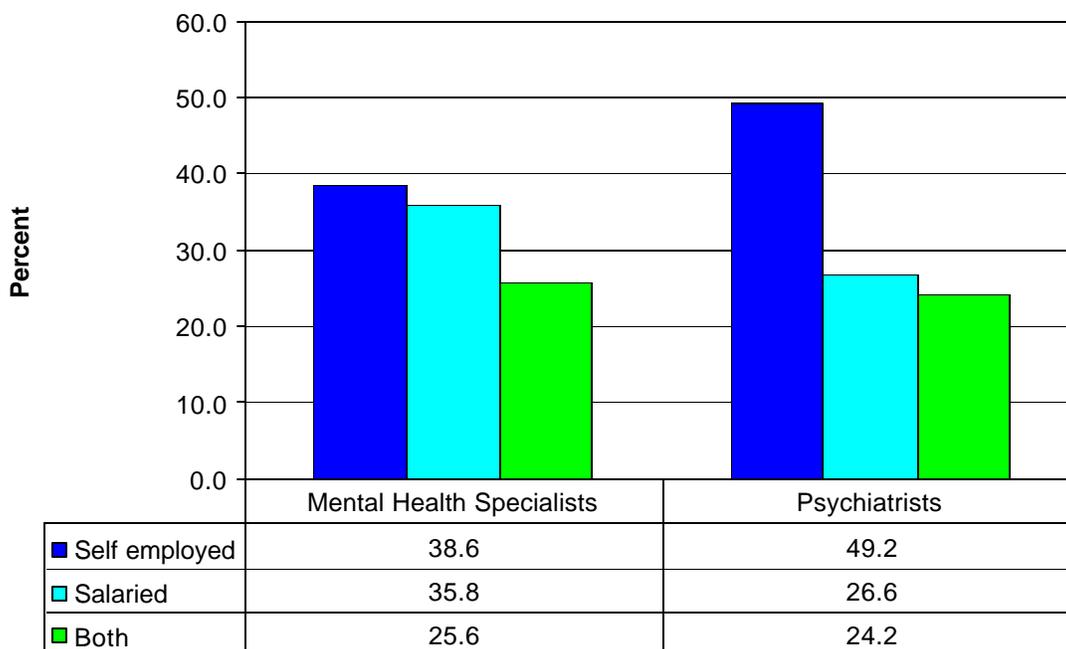
respectively. The primary source of psychiatrists in New Castle County (25%) is Pennsylvania. In contrast to psychiatrists, mental health specialists mainly (62%) come from colleges/universities in the region. The prominent regional source of mental health specialists for Kent (35%) and Sussex (23%) counties is Delaware. Thirty percent of New Castle County's mental health specialists come from colleges/universities in Pennsylvania.

Practice Characteristics

Mental health professionals may practice in a variety of settings, including self employed, salaried or both. Some differences between psychiatrists and mental health specialists are apparent, while other differences are surprisingly small.

One of the key decisions a mental health professional will make is whether to become self-employed or to join an existing practice as a salaried employee. While one would tend to think that this decision is an either/or decision, that is not supported in Figure 3.1.

Figure 3.1
Primary Employment
by Mental Health Professional Class

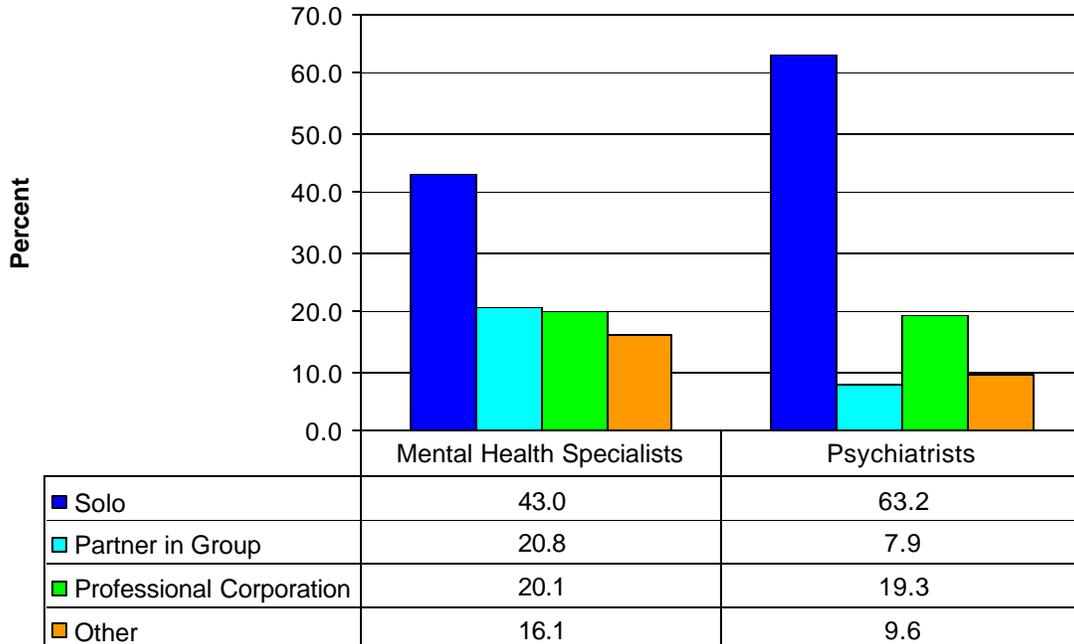


Source: Center for Applied Demography & Survey Research, University of Delaware

When mental health professionals were asked about their primary employment they could choose more than one answer. One quarter of mental health professionals indicated that they were involved in both primary types of employment (see Figure 3.1). Presumably this suggests that they are salaried but are engaged in consulting activities outside of their primary employment.

Psychiatrists are more likely (49%) to indicate that their primary form of employment is self employed compared to mental health specialists of whom 39% indicates self employment.

Figure 3.2
Self-Employment Type
by Mental Health Professional Class

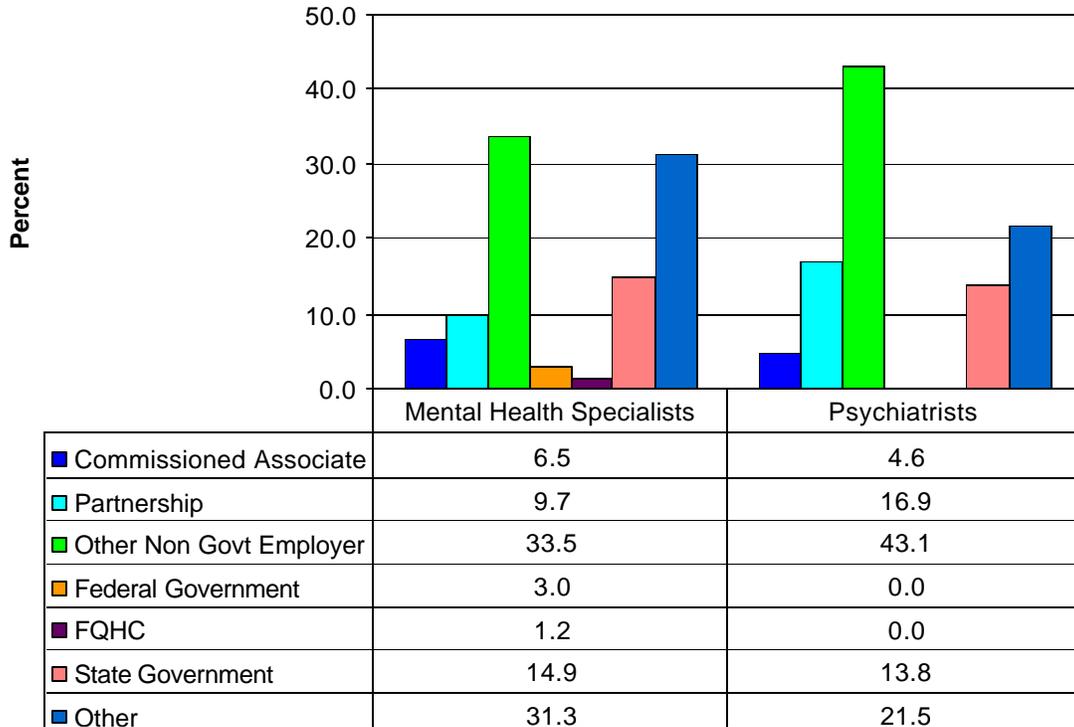


Source: Center for Applied Demography & Survey Research, University of Delaware

Just as differences exist as to the type of employment chosen by mental health professionals, differences also exist within the self employed group. This is shown in Figure 3.2, above. Clearly psychiatrists are more oriented toward a solo practice (63%) than mental health specialists (43%).

Mental health professionals employed as a salaried employee have a wide spectrum of employment options (Figure 3.3). Most mental health professionals work for a non-governmental employer (43% of psychiatrists and 33% of mental health specialists). Around 14% of both psychiatrists and mental health specialists work for state government. No psychiatrists indicated that they are employed by the federal government or a federally qualified health center, while about 4% of mental health specialists work for these employers.

Figure 3.3
Salaried Type
by Mental Health Professional Class



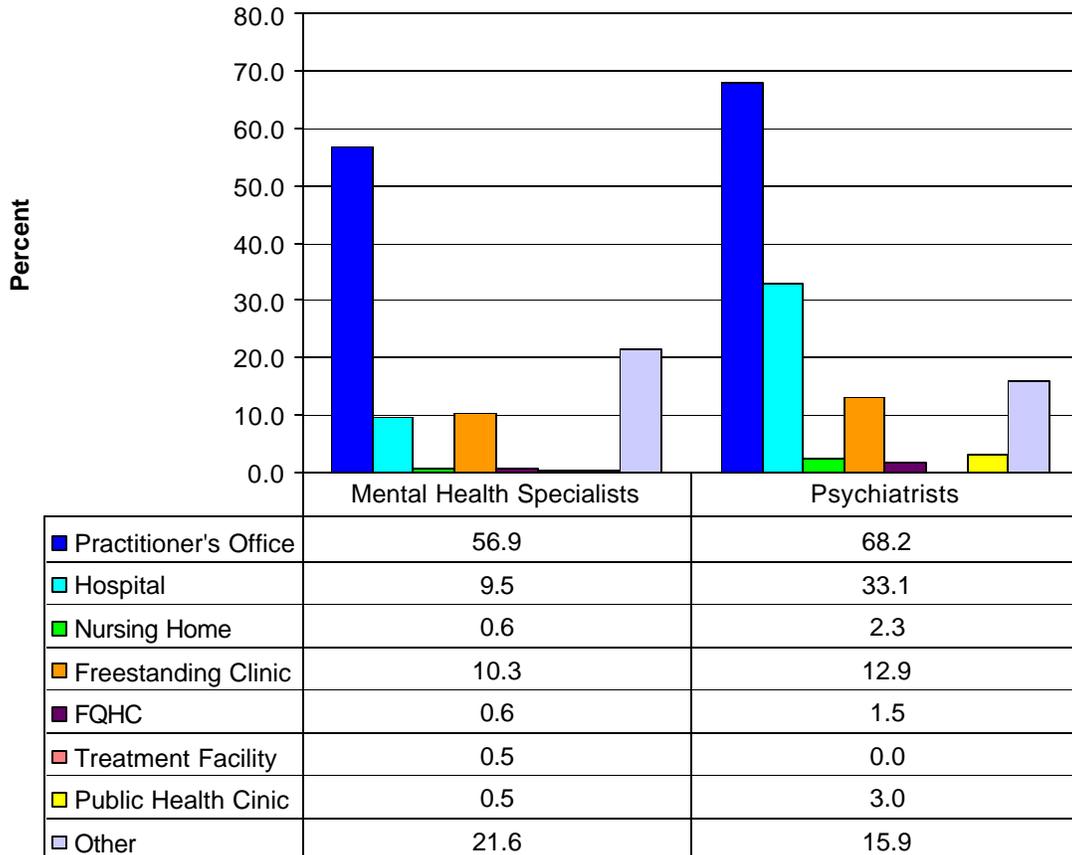
Source: Center for Applied Demography & Survey Research, University of Delaware

Mental health professionals were also asked to describe the setting of their employment within three broad categories: clinical care, federal health facility (VA hospitals or other federal health facilities excluding Federally Qualified Health Centers), and school. About 87% percent of the mental health professionals responding selected only the clinical care settings. About 5% of the respondents did not select the clinical care setting. The detailed responses within the clinical care setting are shown in Figure 3.4.

First of all, it is important to note that these categories are not mutually exclusive. Many mental health professionals selected more than one. Most psychiatrists (68%) and many mental health specialists (57%) indicated that the clinical setting of their primary employment is a practitioner's office. Psychiatrists (33%) are more likely to work in a hospital than mental health specialists (9.5%). About 13% of psychiatrists work in freestanding clinics, while about 10% of

mental health specialists indicated this setting for their primary employment. The two groups select all of the other settings with similar frequencies.

Figure 3.4
Clinical Setting
by Mental Health Professional Class



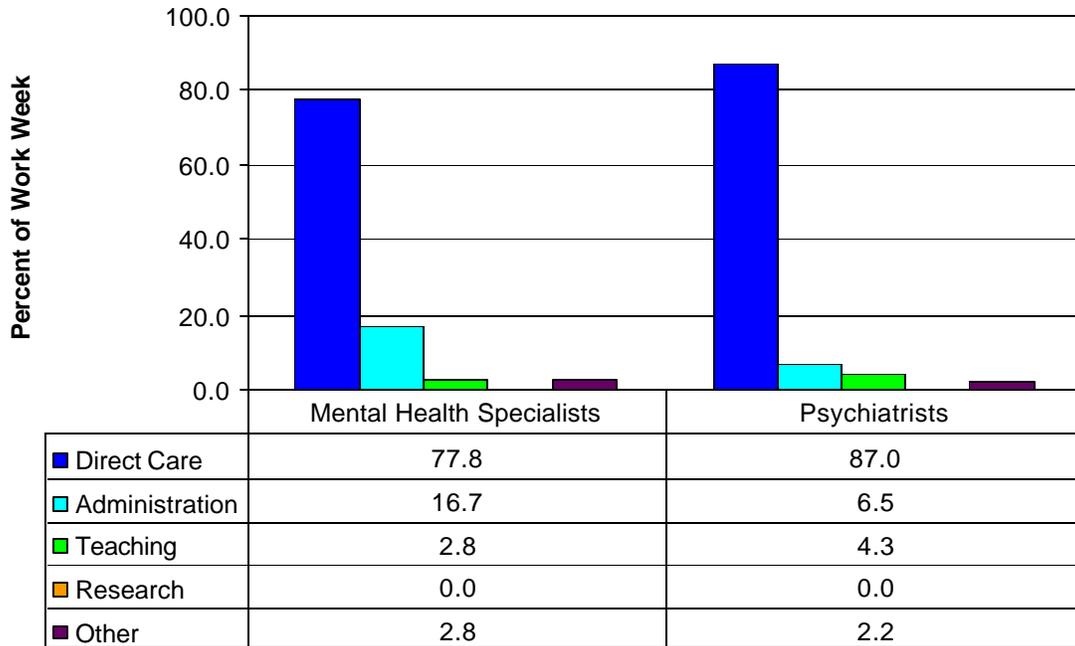
Source: Center for Applied Demography & Survey Research, University of Delaware

In order to calculate full-time equivalencies, mental health professionals were asked to describe the way they distributed their time over a typical week. The categories included direct patient care, administration, teaching, research, and other. In general, the responding psychiatrist's work week on average was slightly over 46 hours and mental health specialist's work week was about 38 hours.

The breakdown for the detailed categories is shown in Figure 3.5. Not surprisingly, both groups of mental health professionals spend the majority of their week on direct care. Psychiatrists spend about 87% of the week on direct care, while mental health specialists spend

about 78% of their week on direct patient care. The time spent on administrative activities clarifies this difference between the two groups. Mental health specialists spend about 17% of their work hours on administrative duties while psychiatrists spend about 6%.

**Figure 3.5
Work Hours
by Activity**

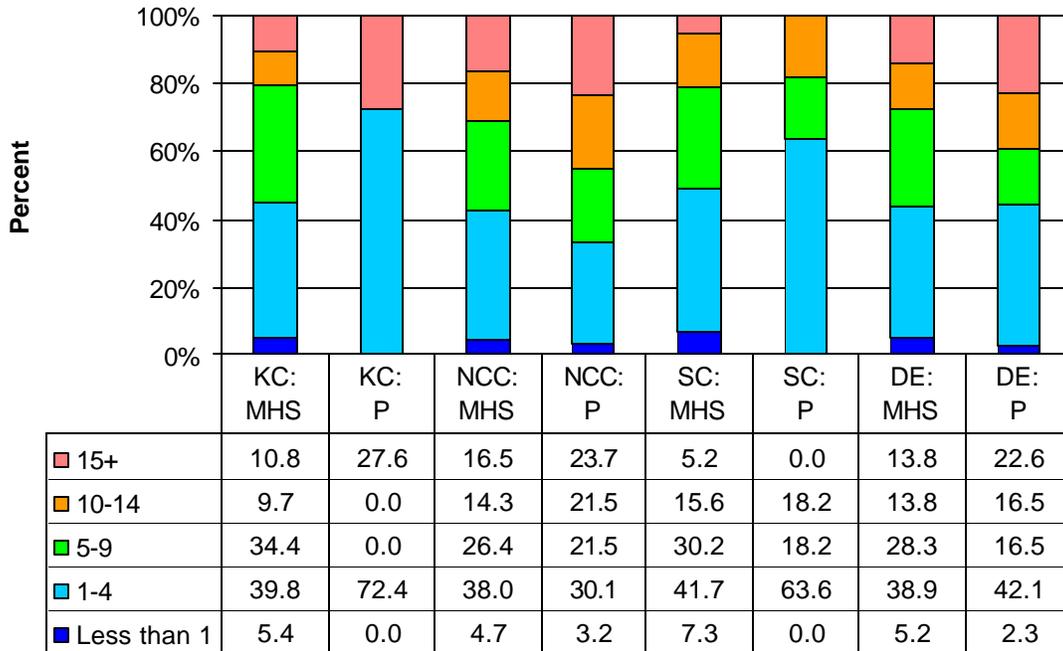


Source: Center for Applied Demography & Survey Research, University of Delaware

Mental health professionals were asked to indicate the length of time they have practiced at their current location. The responses are tabulated in Figure 3.6. Overall, about 40% of all mental health professionals have been practicing at the same location for 1-4 years. Only 15% have practiced at the current location for more than 15 years. Only marginal differences exist among counties for mental health specialists. Across counties, about the same proportion of mental health specialists fall within the same group. However, significant differences exist among psychiatrists in Delaware's counties. Most striking is the fact that only about 30% of psychiatrists in New Castle County have been practicing at their current location for 1-4 years, compared to Kent (72%) and Sussex (64%) counties. Also, no psychiatrists from Sussex County have

indicated length of practice to be 15 years and above. This is very likely related to the low number of psychiatrists in Sussex County.

Figure 3.6
Length of Practice at Current Location
by County

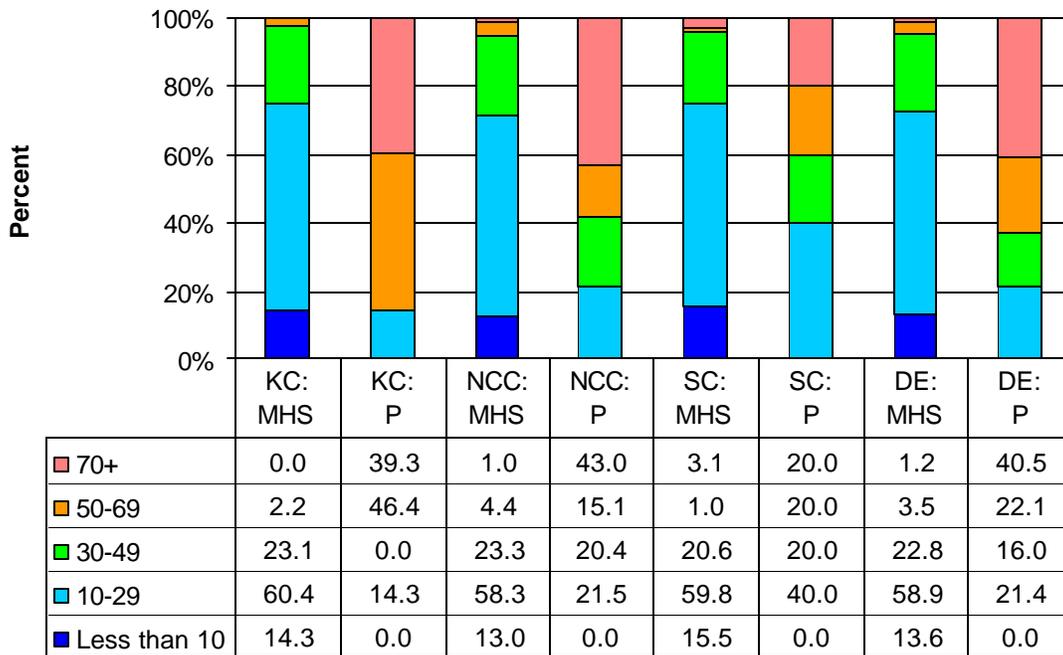


Source: Center for Applied Demography & Survey Research, University of Delaware

The survey asked respondents to indicate the number of patient encounters they have in a week. Detailed tabulation of answers is provided in Figure 3.7. Looking at the State of Delaware and both mental health profession groups together, one would conclude that about 50% of respondents see 10-29 patients a week. However, there are significant differences between the two groups. About 60% of mental health specialists see 10-29 patients but only 21% of psychiatrists see this number of patients a week. Forty percent of psychiatrists see 70 or more patients in a week while only 1% of all mental health specialists see this many patients in a week.

The proportion of patient encounters for mental health specialists varies minimally across counties. On the other hand, the variation of patient encounters by psychiatrists across counties is significant. Psychiatrists in Kent County are most likely (46%) to see 50-69 patients and New Castle County’s psychiatrists are most likely (43%) to see 70 or more patients. Interestingly psychiatrists practicing in Sussex County are most likely (40%) to see only 10-29 patients. This information seems to contradict some of the observations made previously about Sussex County’s psychiatrists. There are at least two plausible explanations. First, the demand for psychiatrists in Sussex County may be significantly lower. The second explanation is that the demand for psychiatrists in Sussex County is comparable to the demand Kent and New Castle counties, but, due to a perceived shortage of psychiatrists, patients chose not to see a psychiatrist at all or see one outside of Sussex County.

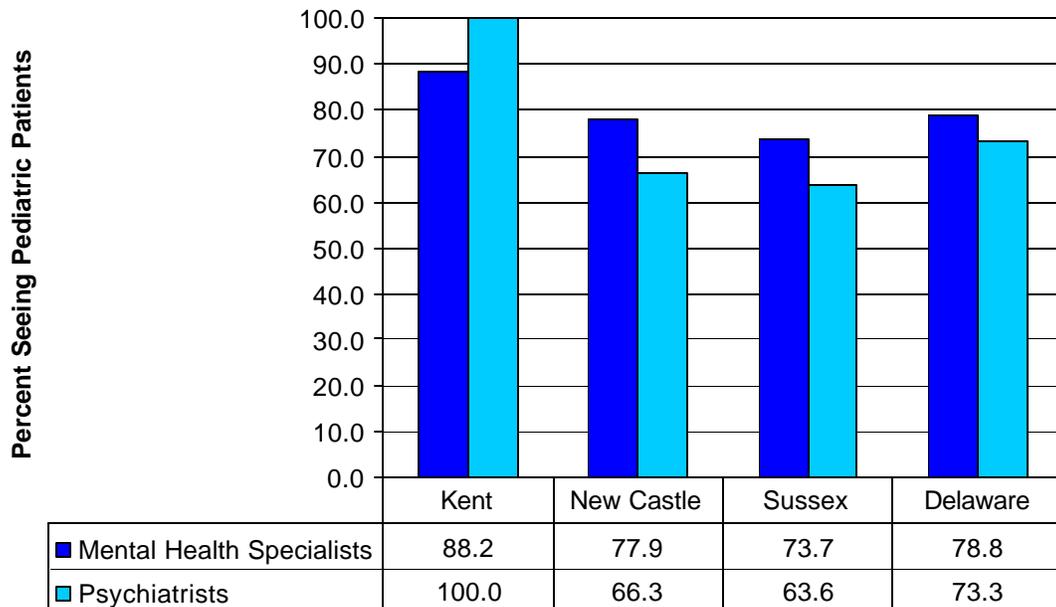
Figure 3.7
Number of Patient Encounters
by County



Source: Center for Applied Demography & Survey Research, University of Delaware

In order to understand the availability of mental health services to pediatric patients, the survey asked respondents to indicate if they see patients under age 21. Tabulation of the responses is presented in Figure 3.8. Kent County has the highest proportion of both mental health specialists (88%) and psychiatrists (100%) indicating that they see pediatric patients. A significantly lower percentage of psychiatrists in New Castle (66%) and Sussex County (64%) see patients less than 21 years of age.

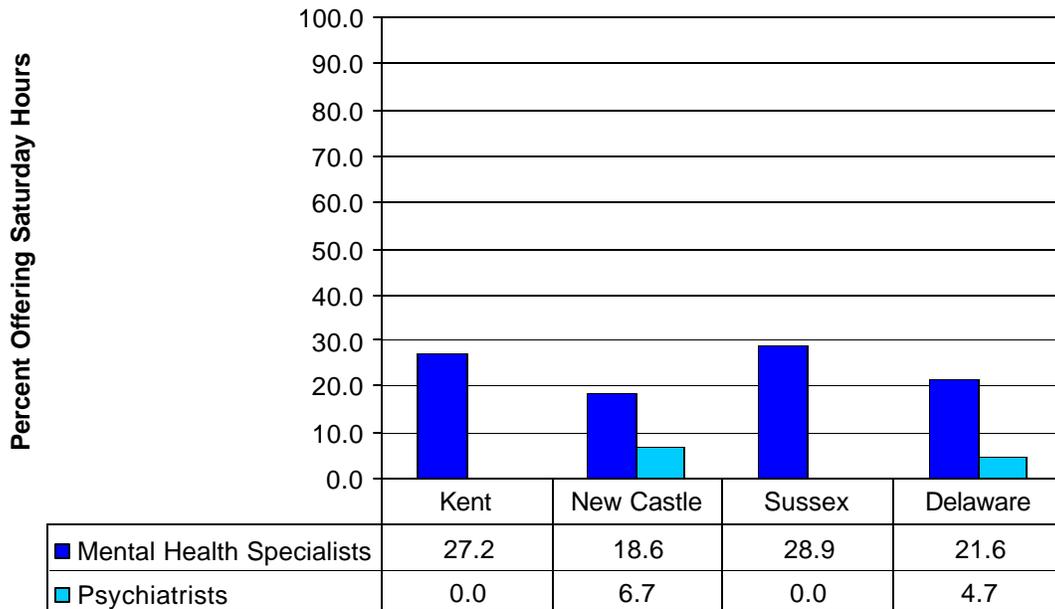
**Figure 3.8
Seeing Pediatric Patients
by County**



Source: Center for Applied Demography & Survey Research, University of Delaware

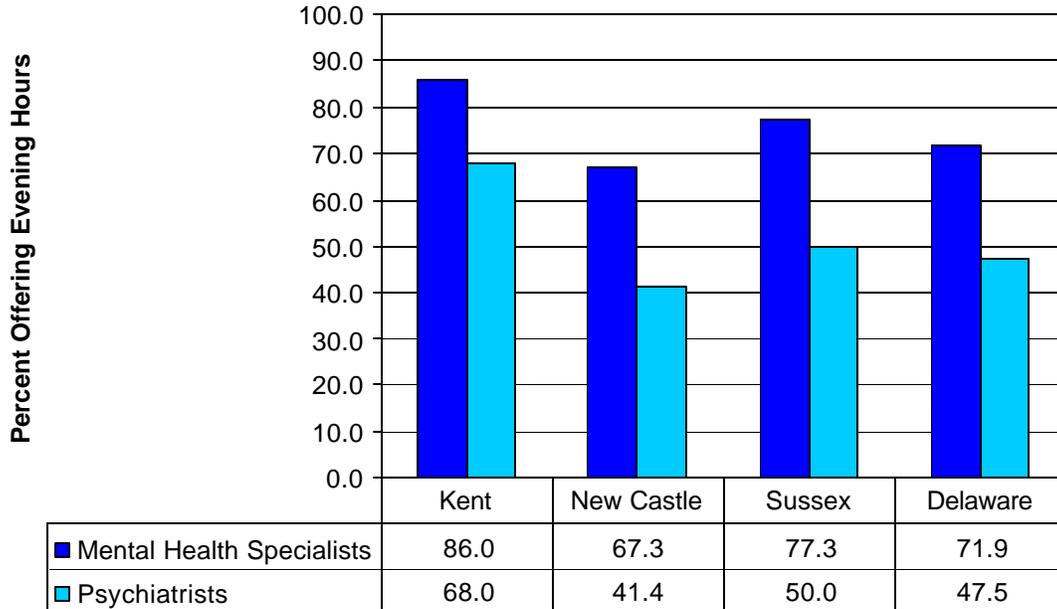
Accessibility to mental health services has a number of dimensions. One of those dimensions is flexible office hours, i.e. hours other than the typical hours that people are working. The survey asked respondents if they provided either Saturday or evening office hours. Their responses are tabulated in Figure 3.9 and 3.10. Mental health specialists are more likely to offer flexible office hours than psychiatrists. Offering evening hours is roughly twice as popular as providing Saturday hours. Mental health specialists in Kent and Sussex counties are more likely to offer evening and Saturday hours than mental health specialists in New Castle County. Psychiatrists in New Castle County are more likely to offer Saturday hours but less likely to offer evening hours than their colleagues in Kent and Sussex counties.

Figure 3.9
Offering Saturday Hours by County



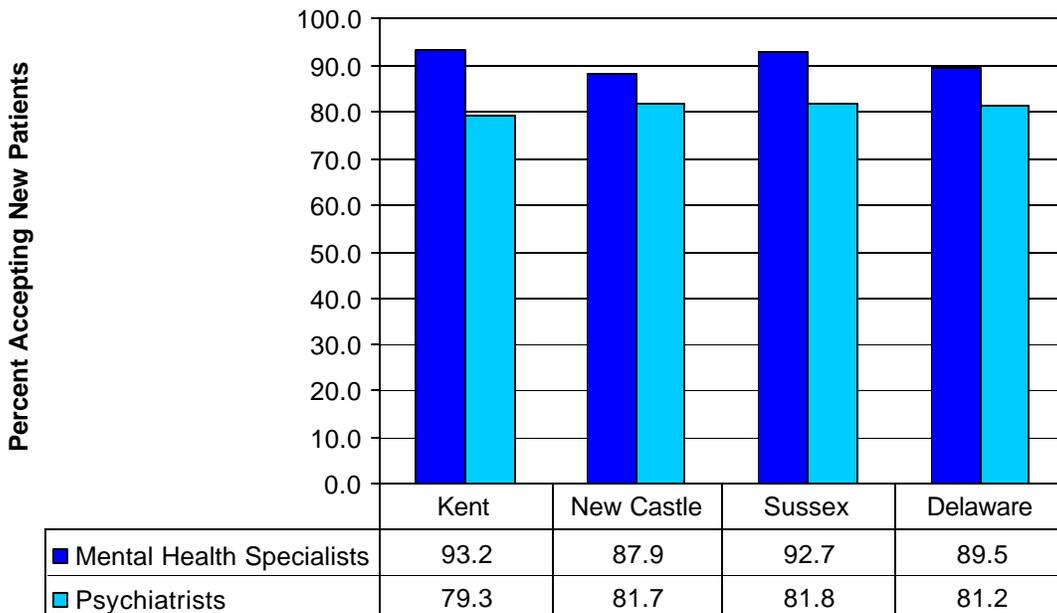
Source: Center for Applied Demography & Survey Research, University of Delaware

Figure 3.10
Offering Evening Hours by County



Source: Center for Applied Demography & Survey Research, University of Delaware

Figure 3.11
Currently Accepting New Patients by County

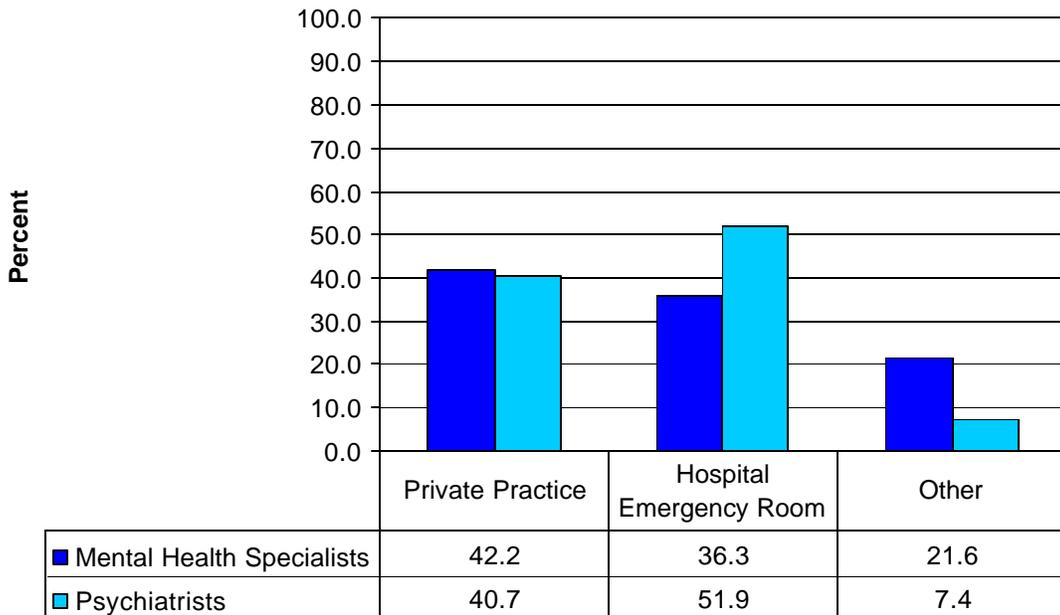


Source: Center for Applied Demography & Survey Research, University of Delaware

The survey asked mental health professionals if they are accepting new patients. Results are found in Figure 3.11. Almost all mental health specialists (around 90%) accept new patients. The percentage of psychiatrists accepting new patients is a bit lower (around 80%).

Even though the majority of mental care professionals across Delaware are accepting new patients, there are some who do not see new patients or cannot make emergency appointments. To learn what happens to these patients, the survey asked to identify the types of referrals they provide. Around 90% of mental health professionals who do not see new patients or cannot accommodate an emergency appointment indicated that they provide referrals. Detailed tabulation of the types of referrals is presented in Figure 3.12. Mental health specialists are most likely (42%) to refer a patient to a private practice, while psychiatrists are most likely (52%) to refer a patient they can't see to a hospital emergency room.

Figure 3.12
Type of Referrals Provided

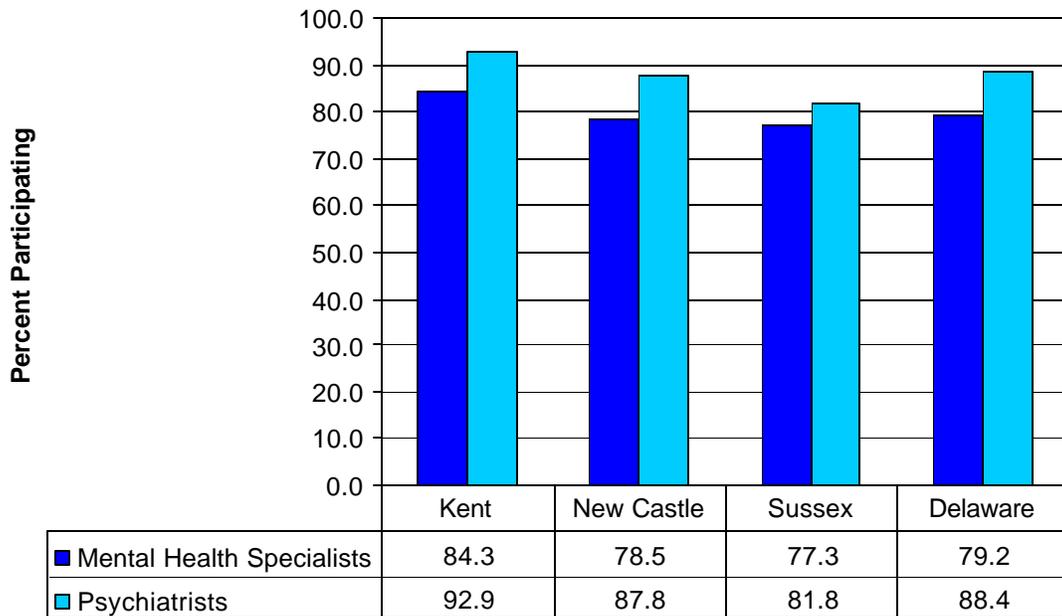


Source: Center for Applied Demography & Survey Research, University of Delaware

Access to mental health services can be affected by the acceptance of insurance plans. The survey asked if mental health professionals participated in such plans. The responses are

found in Figure 3.13. Overall, around 20% of psychiatrists and little more than 12% of mental health specialists do not participate in insurance plans. There are differences between the counties. Kent County psychiatrists and mental health specialists are more likely to accept insurance plans than their counterparts located in New Castle County or Sussex County. Both psychiatrists and mental health specialists in Sussex County are least likely (by a small margin) to participate in insurance plans.

Figure 3.13
Insurance Plan Participation
by County

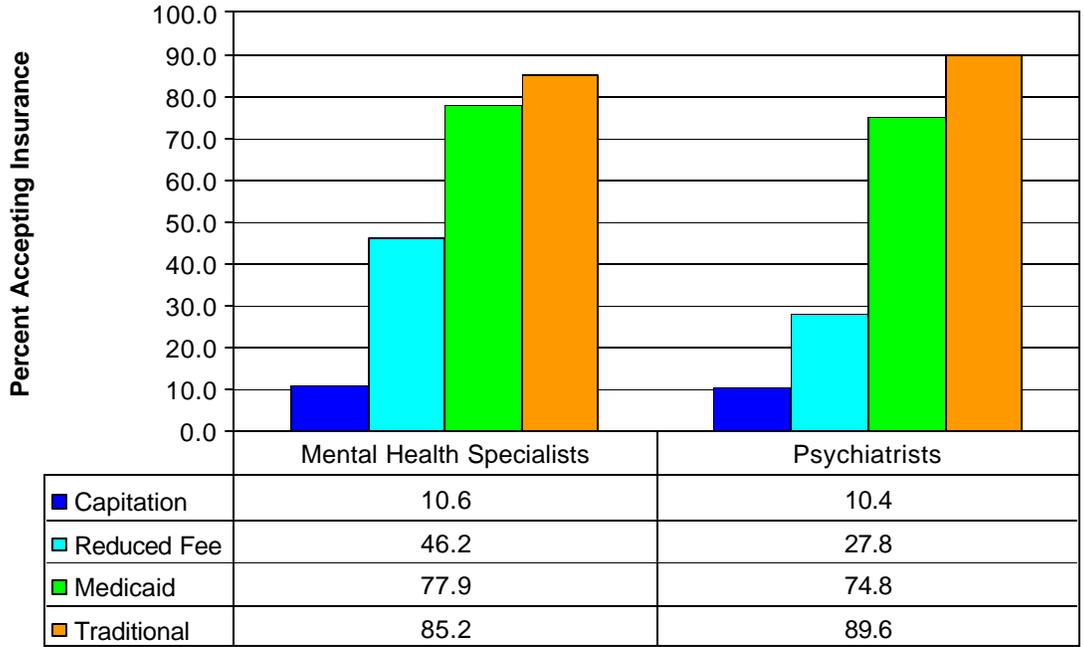


Source: Center for Applied Demography & Survey Research, University of Delaware

Access to mental health services is impacted by the insurance coverage that a patient presents to the mental health professional. Acceptance of insurance plans can allow a mental health professional to extend services to a wider range of patients. Mental health professionals were asked to identify the type of insurance plans they participate in. The options included capitation, reduced fee for service, Medicaid and traditional insurance with balance billing. The responses to this question are found in Figure 3.14. Those who participate in insurance plans most commonly accept insurance plans are traditional plans with balance billing. Reduced fee for

service is accepted by 46% of mental health specialists compared to 28% of psychiatrists. Medicaid is accepted by 78% of mental health specialists and by 75% of psychiatrists.

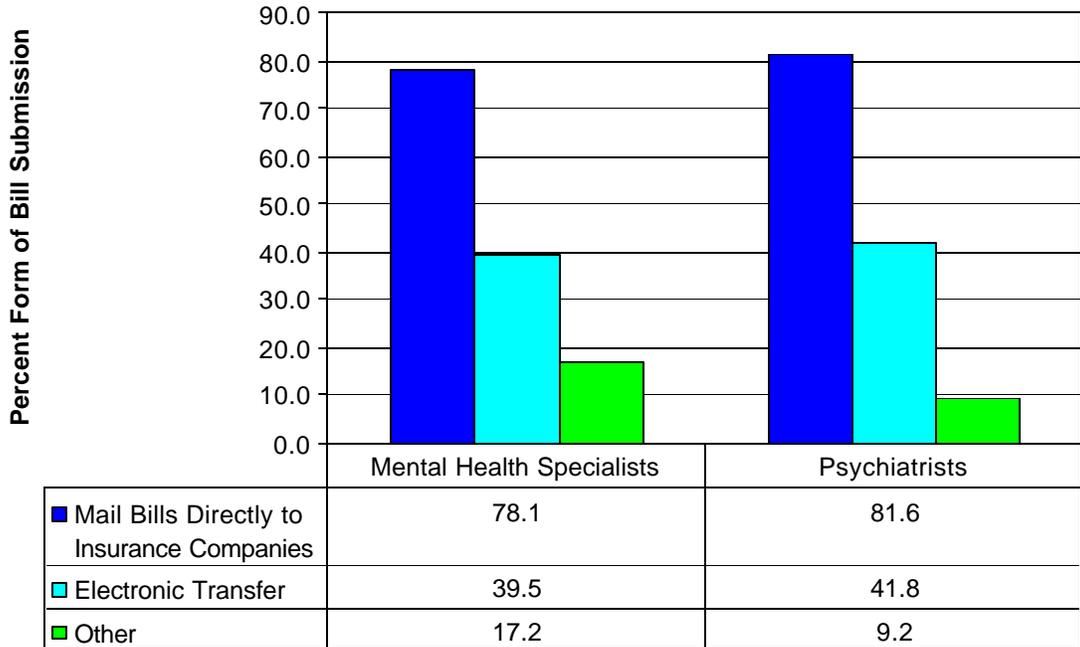
Figure 3.14
Type of Insurance Accepted



Source: Center for Applied Demography & Survey Research, University of Delaware

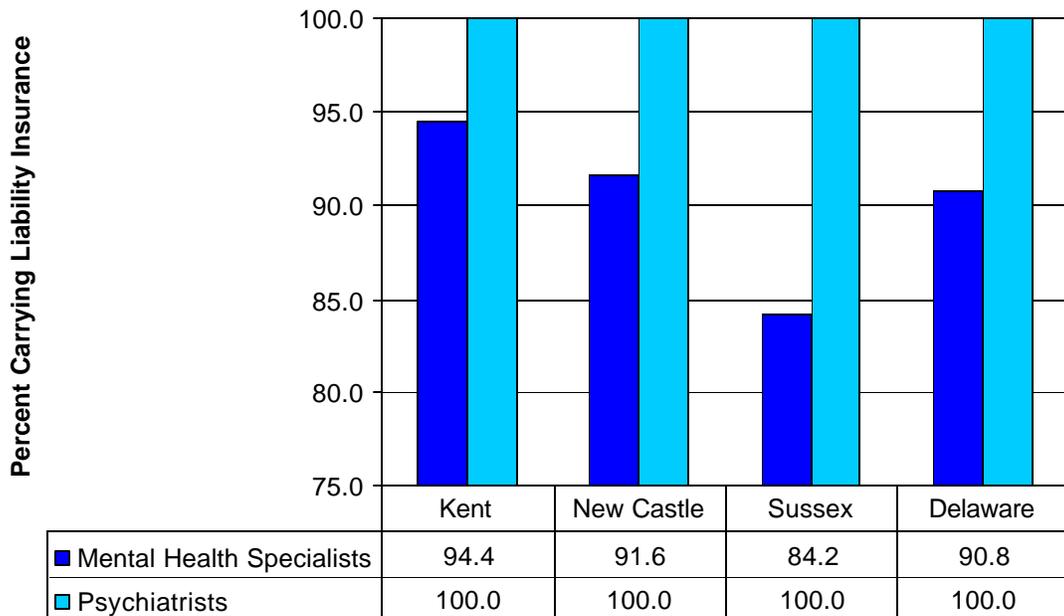
Mental health professionals were asked to indicate how they currently submit bills and related paperwork to the insurance companies. As shown in Figure 3.16, more than half of the mental health specialists (78%) and psychiatrists (82%) submit their bills to insurance companies by mailing them. Less than half of mental health professionals submit their bills electronically.

Figure 3.15
Current Form of Bill Submission



Source: Center for Applied Demography & Survey Research, University of Delaware

Figure 3.16
Liability Insurance by County



Source: Center for Applied Demography & Survey Research, University of Delaware

Mental health professionals were asked to indicate if they carry liability insurance. Figure 3.16 shows their responses. All psychiatrists in Delaware indicated that they carry liability insurance. Kent County's mental health specialists are most likely (94%) to carry liability insurance, while those in Sussex County are least likely (84%) to carry liability insurance.

Spatial Distribution

The spatial distribution of FTE psychiatrists is shown in Figure 4.1. In Figure 4.2, the spatial distribution of FTE mental health specialists is depicted. Responses were received from 24 of the 27 census county divisions.

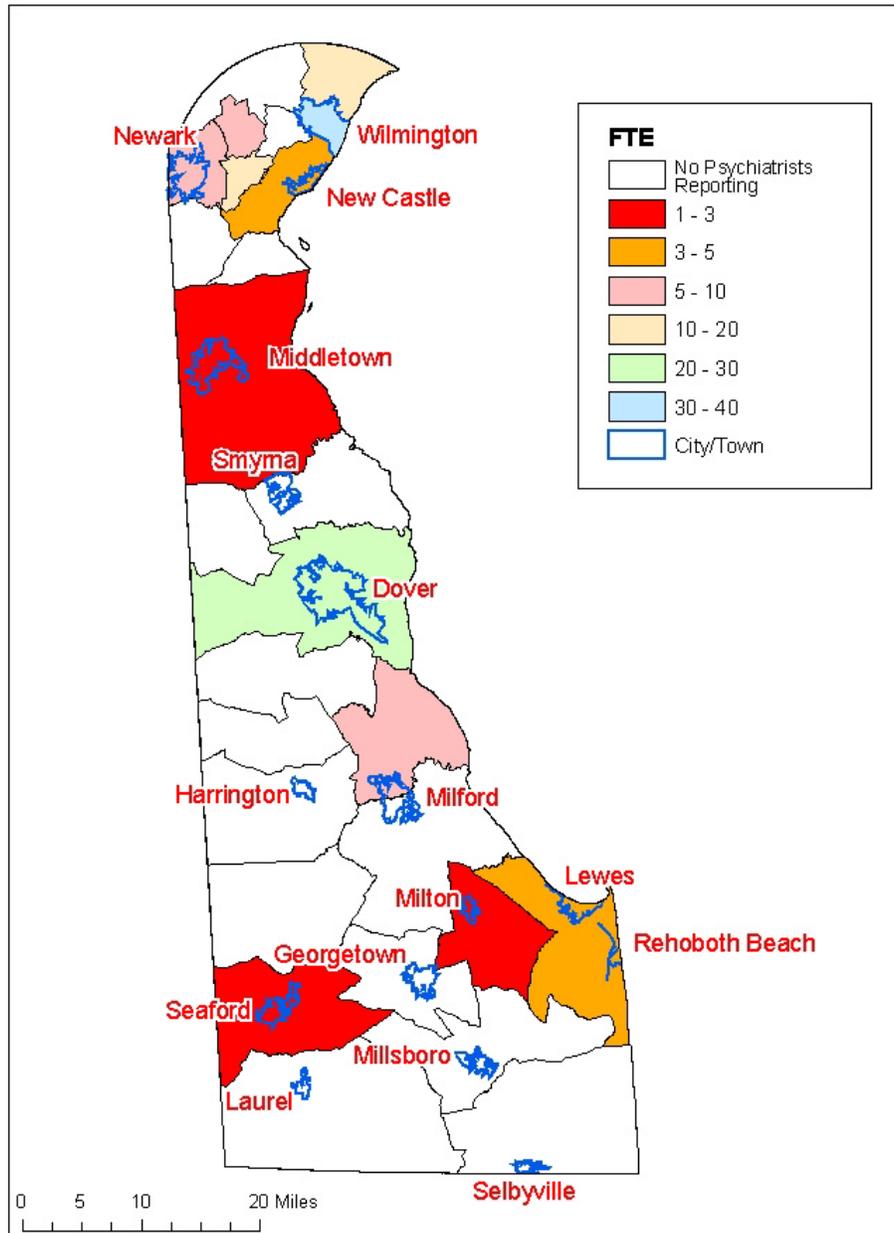
Figures 4.3 and 4.4 show the number of persons served by a psychiatrist or a mental health specialist given the responses to the survey.

It is imperative to note that the census county divisions that indicate “No psychiatrists reporting” or “No mental health specialists reporting” really indicate one of two plausible reasons:

- a) there are some psychiatrists/mental health specialists in these CCDs but none responded to the survey OR
- b) there are no psychiatrists/mental health specialists in these CCDs thus no responses were received

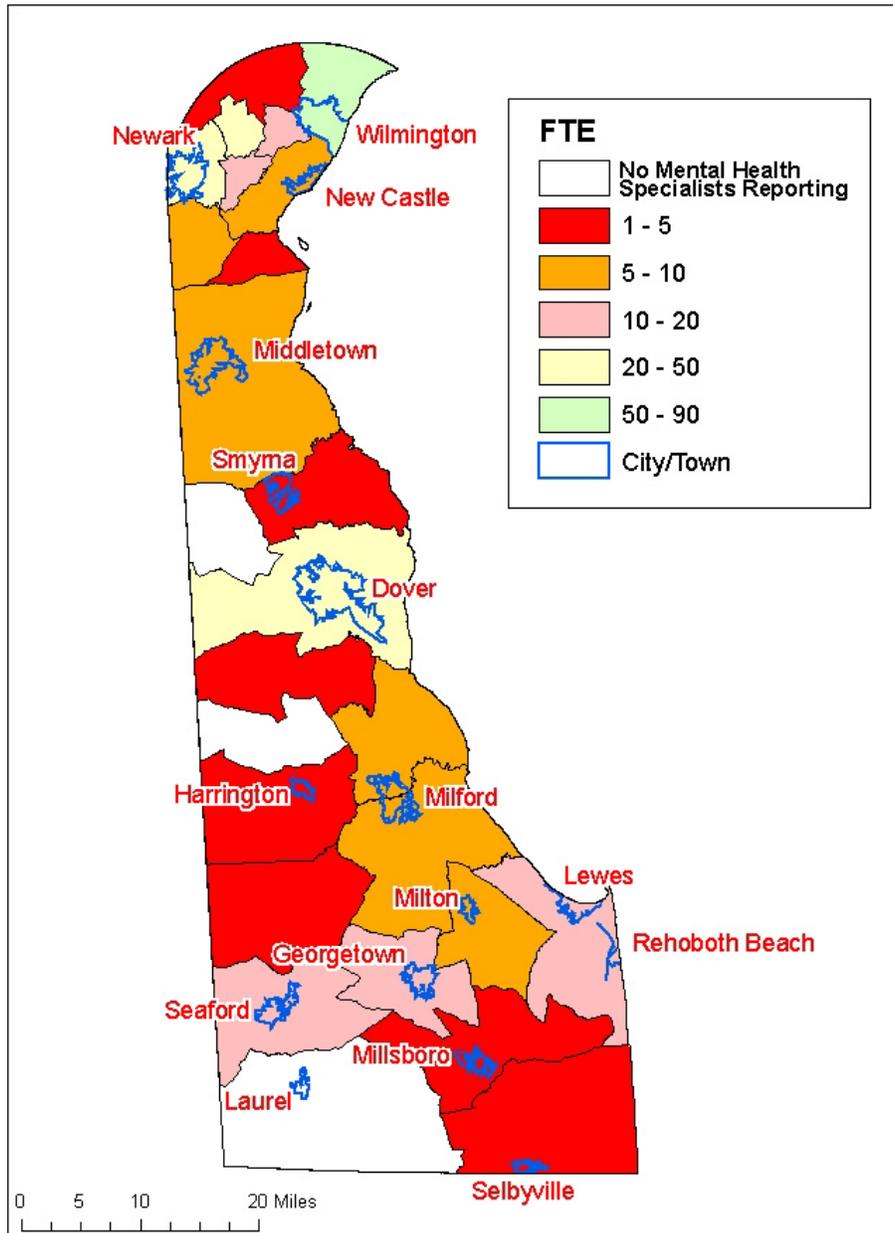
Consequently, the adequacy of mental health care in census county divisions indicating “No psychiatrists reporting” or “No mental health specialists reporting” needs to be evaluated along with the data shown for adjacent CCDs.

Figure 4.1
Number of Psychiatrist FTEs
by Census County Division



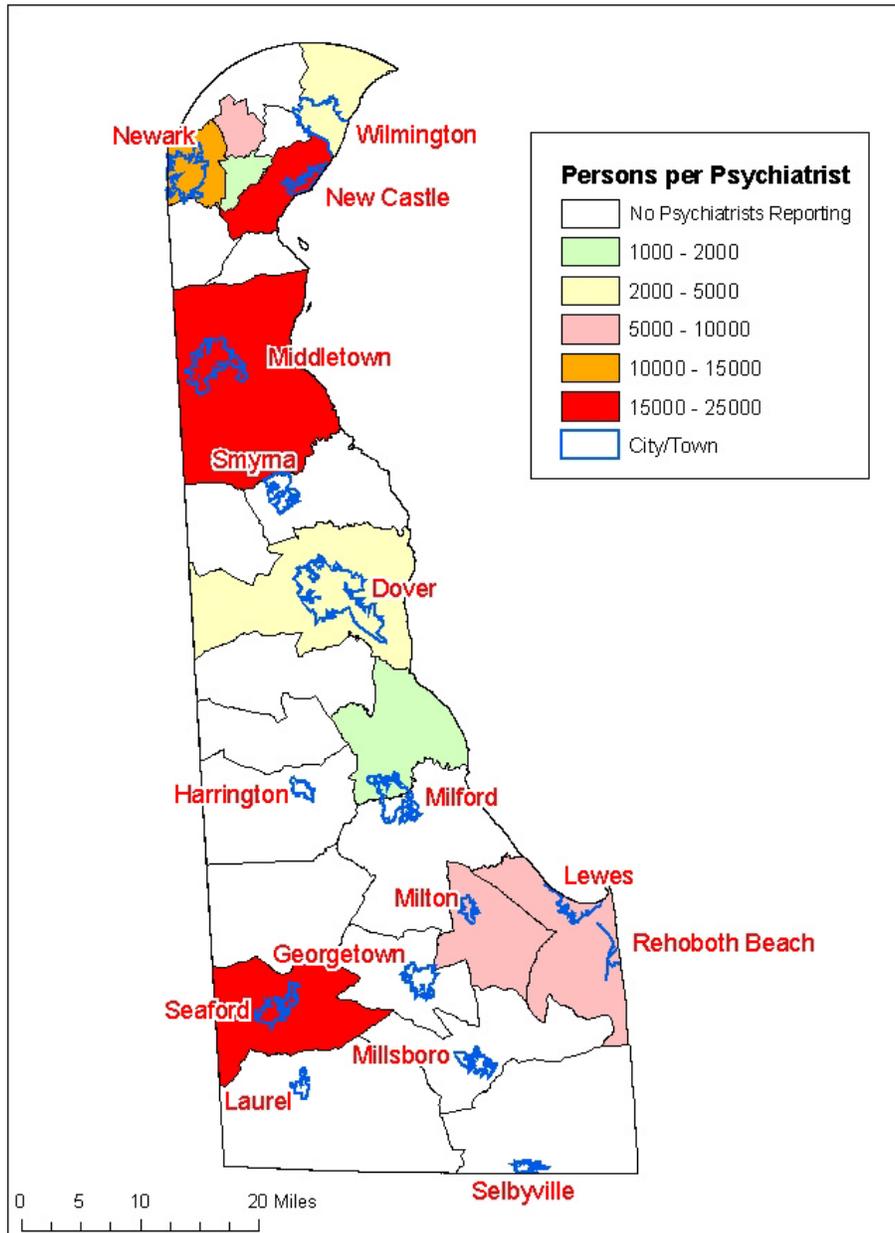
Source: Center for Applied Demography & Survey Research, University of Delaware

Figure 4.2
Number of Mental Health Specialist FTEs
by Census County Division



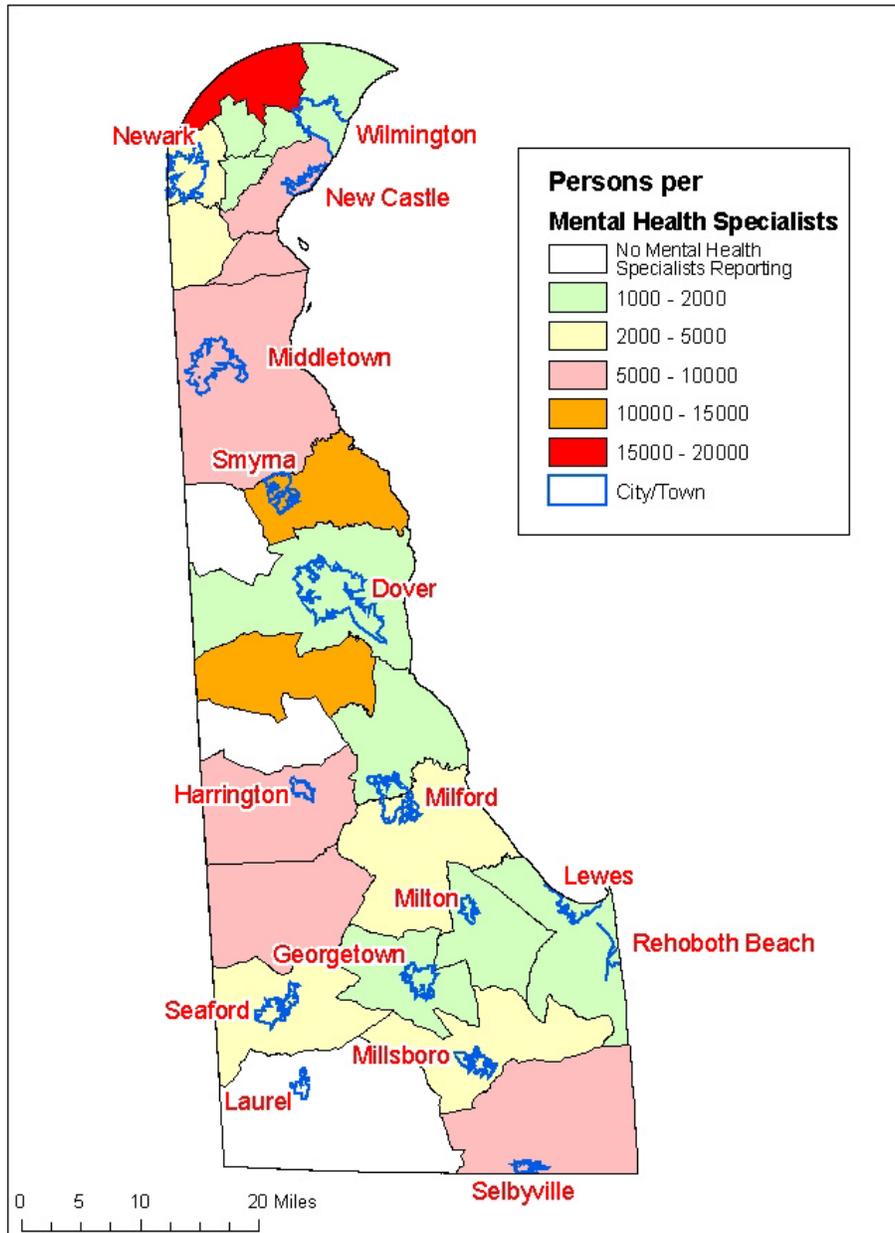
Source: Center for Applied Demography & Survey Research, University of Delaware

Figure 4.3
Number of Persons per Psychiatrist
by Census County Division



Source: Center for Applied Demography & Survey Research, University of Delaware

Figure 4.4
Number of Persons per Mental Health Specialist
by Census County Division



Source: Center for Applied Demography & Survey Research, University of Delaware

Observations

This survey of mental health professionals in Delaware is in its first year and is intended to provide information that will be useful to policymakers in Delaware. Even without a complete reporting the observations about mental health professionals in Delaware collected and analyzed in this study are statistically sound and a number of findings can be drawn from the data:

- Based on the survey results, adjusted for non-respondents, the number of mental health professionals with an active practice in Delaware is 763; this represents 534 full time equivalent mental health professionals.
- About 17% of all mental health professionals are psychiatrists, while 83% are mental health specialists (psychologists, social workers, professional counselors of mental health, and chemical dependency care specialists).
- Sussex County has the least favorable ratio of 22,983 persons served by one full time equivalent psychiatrist compared to 1:5,146 in Kent County and 1:6,253 in New Castle County. The statewide ratio of full time equivalent psychiatrist to population is 1:7,075.
- Mental health specialists are more likely to be female in all counties, while psychiatrists are more likely to be female only in Kent County.
- About 27% of all psychiatrists in Delaware are Asian, compared to 1% of mental health specialists indicating Asian as their race.
- The highest proportion (36%) of psychiatrists with Hispanic origin can be found in Sussex County. This compares to Kent County with 24% and New Castle County with 7%.
- Sussex County, the fastest growing county with the oldest residents on average, has the highest proportion of mental health specialists 60 years and above.
- Almost 10% of psychiatrists in New Castle County indicated that they do not expect to be active five years from now. The highest level (16%) of uncertainty can be observed in Sussex County among mental health specialists.
- The majority (68%) of Delaware's mental health professionals grew up in the region; 29% of them in Delaware. One-third of mental health specialists are from Delaware while only 7.5% of psychiatrists are from Delaware.
- Mental health professionals who grew up in Maryland are more likely to locate in Sussex County, while those who grew up in New Jersey, New York and Pennsylvania tend to locate within New Castle County.

-
- Over 70% of psychiatrists practicing in Delaware graduated from colleges/universities outside of the region while 62% of mental health specialists practicing in Delaware graduated from colleges/universities in the region (PA, NY, NJ, MD, DE).
 - Delaware's psychiatrists are more likely to be self employed (49%) than mental health specialists (39%).
 - Psychiatrists spend about 87% of their work week on direct patient care while mental health specialists spend about 78% on direct patient care. The remainder of their time is spent mostly on administration.
 - About 30% of psychiatrists in New Castle County have been practicing at their current location for less than 5 years compared to 72% in Kent and 64% in Sussex counties.
 - About 60% of mental health specialists see 10-29 patients a week but only 21% of psychiatrists see this number of patients. Forty percent of psychiatrists see 70+ patients a week while only 1% of mental health specialists see this many patients.
 - Kent County has the highest proportion of mental health specialists (88%) and psychiatrists (100%) indicating that they see pediatric patients.
 - Mental health specialists are more likely to offer flexible hours than psychiatrists. Offering evening hours is roughly twice as popular as providing Saturday hours.
 - Almost all mental health specialists (90%) accept new patients. The percentage of psychiatrists accepting new patients is 80%.
 - Mental health specialists are most likely (42%) to refer a patient to a private practice, while psychiatrists are most likely (52%) to refer a patient they cannot see to a hospital emergency room.
 - Kent County's mental health specialists are most likely (84%) to participate in insurance plans compared to Sussex County's mental health specialists who are least likely (77%) to participate in insurance plans. Kent County's psychiatrists are most likely (93%) to participate in insurance plans compared to Sussex County's psychiatrists who are least likely (82%) to accept insurance plans from their patients.
 - Traditional plans with balance billing are the most commonly accepted (87%) insurance plans among mental health professionals. Capitation plans are the least likely (10%) accepted type of insurance.
 - All psychiatrists in Delaware indicated that they carry liability insurance. Kent County's mental health specialists are most likely (94%) to carry liability insurance, while those in Sussex County are least likely (84%) to carry liability insurance.

The database, while not complete, is substantial. The survey instrument may be refined prior to conducting it again to better measure the key items and eliminate those items that add to the burden of the respondents without adding to needed knowledge.

APPENDIX

**DELAWARE MENTAL HEALTH SURVEY
2005**

PLEASE COMPLETE THIS QUESTIONNAIRE & RETURN IN THE ENCLOSED STAMPED ENVELOPE

1. Indicate your mental health profession:

- | | |
|--|--|
| <input type="checkbox"/> Psychiatrist | <input type="checkbox"/> Professional Counselor of Mental Health |
| <input type="checkbox"/> Psychologist | <input type="checkbox"/> Chemical Dependency Professional |
| <input type="checkbox"/> Social Worker | |

2. Are you currently active in any of the described mental health professions (i.e.: seeing patients and/or doing tasks necessary for the care of patients):

- | | |
|---|--|
| <input type="checkbox"/> Yes, in training | <input type="checkbox"/> No, retired |
| <input type="checkbox"/> Yes, working full time | <input type="checkbox"/> No, inactive |
| <input type="checkbox"/> Yes, working part time (less than 30 hours per week) | <input type="checkbox"/> No, other (please specify): _____ |

**IF YOU ARE NOT CURRENTLY ACTIVE (I.E. RETIRED, INACTIVE OR OTHER),
PLEASE SKIP TO QUESTION 26 (PAGE 5).**

OTHERWISE, PLEASE COMPLETE THE FOLLOWING

3. On average, how many hours per week do you spend on each of the following activities:

- _____ Hours - Direct patient care or services and related paperwork
_____ Hours - Direct management and related paperwork
_____ Hours - Teaching
_____ Hours - Research
_____ Hours - Other (please specify): _____

4. What is the setting of your primary employment (please check all that apply):

Clinical Care Setting:

- Practitioner's Office (solo, member of group practice...)
 Hospital (except federal)
 Nursing Home
 Freestanding Clinic (administratively distinct from a hospital, nursing home, etc.)
 Federally Qualified Health Center
 Treatment Facility for the Handicapped or Disabled
 Public Health Clinic
 Other (please specify): _____

Federal Health Facility:

- Veterans' Administration (VA hospital)
 Other (please specify): _____

School:

- University or College
 Other (please specify): _____

4. What kinds of services do you provide (check all that apply)?

- 1. Addiction Counseling
- 2. Family Counseling
- 3. Group Therapy
- 4. Individual Counseling
- 5. Other (please specify): _____

5. What is the form of your primary employment:

Self-Employed/Principal (please check all that apply):

- 1. Solo Practice
- 2. Partner in Group Practice
- 3. Professional Corporation
- 4. Other (please specify): _____

Salaried, Employed by (please check all that apply):

- 1. Commissioned Associate
- 2. Partnership of Group Practitioners
- 3. Other Non-Government Employer (hospital, school, etc.)
- 4. Federal Government
- 5. Federally Qualified Health Center
- 6. State Government
- 7. Other (please specify): _____

PLEASE PROVIDE THE FOLLOWING INFORMATION FOR YOUR PRIMARY DELAWARE-BASED PRACTICE SITE.

6. What is the facility name, address and zip code of your primary DELAWARE-BASED practice site?

 (Facility Name)

 (Street Address)

 (City) (State) (Zip Code)

7. How long have you been practicing at this location? _____

8. What type of site is this?

- 1. Private Office
- 2. Clinic
- 3. Hospital
- 4. Other _____

9. How many other types and number of Mental Health providers currently practice at this site?

<u>Type</u>	<u>Amount</u>
<input type="checkbox"/> 1. Psychiatrist	_____
<input type="checkbox"/> 2. Psychologist	_____
<input type="checkbox"/> 3. Social Worker	_____
<input type="checkbox"/> 4. Professional Counselors of Mental Health	_____
<input type="checkbox"/> 5. Chemical Dependency Professionals	_____

10. About how many patient encounters do you have in a week? _____

11. Do you see pediatric patients (under 21 years)? Yes No

a. If YES to above, beginning at what age do you see patients? _____

12. Do you offer Saturday or evening hours?

a. Offer Saturday appointments: Yes No

b. Offer evening hours: Yes No

13. When a patient calls your office to request a routine (non-emergency) appointment, what is the usual elapsed time between the request and the resulting appointment for new and established patients (please provide the number of days OR weeks):

a. New patients: _____ Days _____ Weeks

b. Established patients: _____ Days _____ Weeks

14. When a patient calls your office with a true emergency, what is the usual elapsed time between the request and the resulting treatment for new and established patients (please check one box):

a. New patients: Hours Days

b. Established patients: Hours Days

15. Are you currently accepting new patients? Yes No

16. If you are NOT accepting new patients or at times are unable to make emergency appointments, do you provide any type of patient referral? Yes No

a. If YES to above, to what source(s)? (**check all that apply**):

Private Practice

Hospital Emergency Room

Other (please specify) _____

17. Do you participate in insurance plans? Yes No

a. If YES to above, please indicate which plans you participate in (**check all that apply**):

Capitation

Reduced fee for service

Medicaid

Traditional insurance with balance billing

18. What are the three biggest problems your practice encounters when dealing with insurance companies?

1. _____

2. _____

3. _____

19. How do you currently submit bills and other related paperwork to your patients' insurance companies? (**Check all that apply**):

Mail bills directly to insurance companies

Electronic transfer

Other (please specify): _____

20. Do you have liability insurance? Yes No

a. If YES to above, please indicate what type and amount of liability insurance you currently have:

<u>Type</u>	<u>Amount</u>

21. Are there people at your site who have the ability to communicate with patients in a language other than English? Yes No

a. If YES to above, please check all that apply:

- Spanish
- French
- Arabic

- Asian (please specify): _____
- Sign Language
- Other (please specify): _____

22. What percentage of your practice's gross fees are unreimbursed (includes uncollectables, not charity or discounts)? (Circle one number below):

0% 5% 10% 15% 20% 25% 30% 35% 40% 45% 50%

23. Do you provide charity care (no fee expected) inside your office? Yes No

a. If NO to above, what is your ranges of fees charged:

- \$0 – \$50
- \$50 - \$100
- \$100-\$150
- \$150-\$200
- Other (please specify): _____

24. Do you provide charity care (no fee expected) outside your office? Yes No

a. If NO to above, what is your ranges of fees charged:

- \$0 – \$50
- \$50 - \$100
- \$100-\$150
- \$150-\$200
- Other (please specify): _____

25. Do you offer flexible or installment payment plans, which would allow patients to pay for services over a period of months: Yes No

ALL RESPONDENTS:

PLEASE COMPLETE THE FOLLOWING QUESTIONS

26. Do you expect to be active in your chosen profession 5 years from now? Yes No Unsure

27. State of residence at time of high school graduation: _____

28. From which college/university did you graduate: _____ Year _____

In what state is the college/university located: _____

29. Did you complete a residency? Yes No

a. If YES to above, what type of residency was it? (*check all that apply*):

General or Family Residency

Hospital Residency

Specialized Residency (*please specify*): _____

Military Service

Other (*please specify*): _____

b. If YES to above, please indicate the state(s) where you did your residency:

State: _____

State: _____

State: _____

30. In which states are you currently licensed to practice? (*Please specify below*):

State: _____

State: _____

State: _____

31. What is your race:

Caucasian or White

African American or Black

Native American or Alaskan Native

Asian or Pacific Islander

Multi-Racial

Other (*please specify*): _____

32. Are you of Hispanic origin: Yes No

33. Gender: Male Female

34. Date of Birth: ____/____/____ (*month/day/year*)

35. Do you have a Delaware business license? Yes No

**IF YOU HAVE ANY ADDITIONAL COMMENTS,
PLEASE FEEL FREE TO INCLUDE THEM IN THE SPACE BELOW.**

THANK YOU FOR YOUR TIME AND COOPERATION IN COMPLETING THIS FORM.
