

Sixteen State Performance Indicator Grant
November 27, 2000
Conference Call
2:00 EST

Minutes by Ellen Sparks, SC

1. **Roll call** by Ron Manderscheid- States participants present: AZ, CO, CT, Wash DC, IL, IN, MO, NY, OK, RI, SC, TX, UT, VA, VT, WA, also Ted Lutterman, Lucille Schacht, Nancy Callahan, and Olinda González.

Diagnosis Modification Proposal- Bernadette Phelan, AZ, presented the rationale for the Diagnosis Modification Proposal. It was determined that the proposal is for new data only and will not apply to data already submitted. It was decided that the group would vote on each category. Item #1 and #2 were passed by the group as the changes are minor editorial changes. Item #3 “Dementia and Other Medical” was tabled for additional clarification. Diagnosis 311 will be added to item #4 but kept as a separate category and removed from Item #5. These two items were also tabled. The question regarding the diagnosis of 296.90 for adults and children was raised. It was decided to check to see if diagnoses for these items and also for items # 6 and 7 have been reported previously. Also, it was suggested that we need to get a sense of the magnitude of the numbers for these categories. This information is to be sent to Bernadette for compilation and further review. We will also talk at the next call about how HIPAA relates to this proposal.

Calculating Age Categories- Nancy Callahan: The issue of calculating age at different points was reviewed. It was noted that for some indicators, the calculation is made on the date of the event (e.g. discharge). It was decided that age and time reported needs to be considered for individual indicators; each workgroup needs to make a recommendation on time reported for age to Nancy. Also, Nancy will send a survey to each state to determine each state’s methodology for the calculation of age.

Presenting 16 State Data Reports at this time- Olinda González reviewed that she has had feedback from other states wanting preliminary State Indicator data reports and that we may be able to formally present basic data (overall numbers) on Penetration Rates and the Adult Consumer Survey. This data presentation would need to provide categorical information on individual state profiles (see the e-mail sent by Olinda earlier today) for community penetration rates in order to explain some existing variability. Another question involves adding another row for forensic and non-forensic data. A final report of the data would be sent to the states for review before disseminating it publically. The data could then be posted on the MHSIP website. Olinda will work with Sudha Metha, Judy Hall and John Pandiani to develop a grid for states to complete, and review other data presentation issues as well as the data itself. In addition, Olinda will schedule a conference call for the final report work group in December or January.

Data Sharing among Workgroups- It was noted by Ron that the workgroups need to analyze comparability issues and send results back to the states for review. The intent is that the data will

go to the State Profile System when this work is complete.

WORKGROUP REPORTS

ACT/SE- John McGrew, IN: The ACT and SE checklists are now being piloted in the field. There are 65 ACT and SE programs being piloted in a number of states. Results should be in at the end of December and analysis will then begin. The response rates are unknown at this time.

Children's Survey Indicators- Randy Koch, VA: In addition to the other states piloting the Youth Services Survey, KY completed the first mailing of the survey and has received 400 surveys, as has OK. Both states will have analysis some time in January. Randy has received feedback on his children's survey to indicator pilot states. He will be able to report on results of this survey on the next conference call.

Atypical Medications- Jocelyn Letourneau, RI: AZ, CO, CT, DC, IL, MO, OK, and VT will be providing hospital data and AZ, CO, CT, DC, MO, OK, VA will be providing community data. for this indicator. Thus far NY and VA have submitted hospital data and VT has submitted community data. She is hoping that states will be able to send data by mid January but at this time she does not have enough data to begin the analysis. She will send another email to remind and update the states.

Seclusion and Restraint- Ted Lutterman: Ted has not been able to run the data by the categories to send out to the states as yet. This will be done as time becomes available, and Noel will forward the data to the states as agreed.

Stakeholder Participation- Donna Stimpson, CT: The draft of the questionnaire to states will be reviewed by Marie Danforth, Ann Rock and the committee members, and will subsequently be sent to the 16 states for response. The committee has tried to shorten the questionnaire in response to feedback that it was too long.

Substance Abuse- Tabled-report will be presented at next conference call.

Recovery- Vijay Ganju: The group has had several conference calls and the participating states have agreed to implement focus groups utilizing a specific protocol developed by the consumer workgroup. Most states are able to fund the costs associated with the focus groups but a request for resources for additional costs (such as transcription and coding of key areas) will be sent to Ron. The plan is to hold the focus groups in January and to have an instrument to pilot by May, 2001.

Symptoms and Functioning- Mary Smith, IL: The group has had some questions regarding some of the specifics of the data collection definitions such as living arrangements. The group will talk to Nancy but it seems to make sense to utilize the definitions for living arrangements that have already been developed by that workgroup. No data has been submitted to Jack as yet.

Criminal Justice- Lucille Schacht NASMHPD: Lucille has received prison data from one state

and has sent an email regarding the definition of arrest rates. Five or six states have a definition and plan for data collection for involvement with jail and other states let Lucille know if they want to participate. Five states share the definition of prison involvement so she has started with that measure.

Mortality- Craig Colton, UT: Some data has been collected, and some has been promised by states. What has been sent seems to be comparable. Craig will be working on analysis in December and January if data that is promised is received.

Living Situation- Nancy Callahan: The workgroup continues to work on this indicator and data has been collected from a couple of states. Nancy will send out definitions to states again, and she will encourage states to send data.

Employment- Denny Geertsen, UT: The group had a conference call and each state has sent copies of employment categories. There are several similarities in categories such as FT, PT etc.among states; however, states differ in time of second or outcome categories (data at 6 months, discharge). Denny will discuss the categories in the next workgroup conference call. The group needs to assess the data and hopes to have some recommendations by the next 16 State conference call.

Link to Physical Health- Deb Kupfer, CO: there will be no data until late winter or early spring.

Readmission within 30 and 180 days- Sudha Mehta, NY: Sudha will have an analysis on 16 State data by January.

Contact within 7 Days- Steve Davis, OK: Steve stated that states need to send their 2000 data on for this indicator.

Costs- Nancy Callahan: Nancy is continuing work on this indicator and now has data from OK and VT. She has requested data from the other states working on these data.

Adult Consumer Survey- Judy Hall, WA: Judy is planning an email to check on the status of states and will then set up a conference call with the adult consumer workgroup.

Utilization/Penetration Rates- John Pandiani, VT: John has State Hospital data from seven states for 2000 and will do another round of reminders to states for the rest of the data needed.

OTHER INFORMATION

Operational Definitions- Ted Lutterman: will present next time.

Nancy Callahan stated that she needs data dictionaries (definitions and codes) for Decision Support 2000. She will send an email for people to respond to requesting this information.

Ron noted that the project is running short on time. He wants to be able to bring the indicators to

conclusion and plan for the final report. He also noted that this work is critical to the Uniform Reporting System.

The call for papers for the Statistics Conference ends in January. Individuals are encouraged to send in papers and in addition we will be planning a presentation specific to this project.

Agenda items for the next conference call:

HIPAA- Ron Tremper is to lead a discussion

Diagnostic Categories- Bernadette to conclude items not yet decided

Discussion on presentation for the National Conference

The next conference call is scheduled for January 8, 2001, 2:00-4:00 Eastern Time.