

**Mental Health Commission
Data Committee
Thursday, September 13th 2018 10:00-11:30 am
At: 1220 Morello Avenue, Suite 100 Conference Room, Martinez, CA**

- I. 10:00 am Call to Order/Introductions**
- II. 10:05 am Public Comment**
- III. 10:10 am Committee members- VOTE on the Chair and Vice Chair of the Committee**
- IV. 10:20 am REVIEW progress to date, including receiving input from MHC Committees and Commissioners and BHS updates to the data dashboard model-with Warren Hayes, MHSA Program Manager**
- V. 10:35 am DISCUSS current draft of data dashboard model**
- VI. 11:00 am DISCUSS the agenda for the next meeting and set a date to reconvene**
- VII. 11:30 am Adjourn Meeting**

Contra Costa Behavioral Health Services Quarterly Report to the Mental Health Commission

August 2018

Preliminary DRAFT Concept Outline

Concept

- A quarterly Director's report that depicts domains and indicators to enable a common understanding of the state of CCBHS with stakeholders
- Enables attention to performance indicators within CCBHS to facilitate continuous improvement
- The following report format is preliminary and any listed data is illustrative only

Domains

- Access to Services
- Staffing Capacity
- Finance
- Services Provided
- Key Performance Indicators
- Quality Assurance
- Topical Areas of Interest

Access to Services

- Concept: how long it takes for someone to get a first appointment for mental health care in our clinics
- Possible Performance Indicators: percentage of routine, urgent and psychiatry appointments made within a prescribed time standard
- Example: the percentage of appointments offered - routine (within 10 business days), urgent (within two business days), and psychiatry (within 15 business days), and average length of time from first request for service to appointment – can be depicted by adult and children’s services in each region
- Context: could depict previous time periods to indicate trends

Staffing Capacity

- Concept: how many people we have to serve the public
- Possible Performance Indicators: numbers of staff by classification, such as clinicians, psychiatrists, community support workers, administrative staff
- Example: could show number of staff available in staffing classifications, what the County has authorized, and number in staffing classifications that are vacant and being actively recruited to fill – could be depicted by program and region
- Context: could depict previous time periods to indicate trends

Finance

- Concept: how much money we spend versus how much revenue is provided
- Possible Performance Indicators: how much revenues and expenditures are budgeted, spent and generated, and how much revenues and expenditures are projected by the end of the fiscal year
- Example: could depict the above by cost center each quarter
- Context: could depict previous time periods to indicate trends in revenues and expenditures

Services Provided

- Concept: how many persons are being served and consumer movement between levels of care – are people recovering as a result of our care
- Possible Performance Indicators: number served by level of service, such as locked facilities, unlocked facilities, full service partnerships, case management, clinic services, provider network, self care
- Example: could depict the above each quarter
- Context: could depict previous time periods to indicate over time possible changes in numbers served from higher to lower levels of care

Key Performance Indicators

- Concept: key data not otherwise covered in the rest of the domains that speak to the impact of service delivery
- Possible Performance Indicators:
 - number of psychiatric emergency service (PES) admissions per month
 - reduction in PES admissions, in-patient hospitalizations, homelessness after full service partnership participation
 - number of persons connected to care by prevention and early intervention programs
 - consumer/family member survey results
- Examples: could update the above as data becomes available
- Context: could depict previous time periods to indicate impact over time

Quality Assurance

- Concept: information not otherwise covered in the rest of the domains that speak to compliance with state and federal requirements for quality assurance
- Possible Performance Indicators:
 - Selected Department of Health Care Services Triennial Audit results
 - Selected Annual External Quality Review results
 - Medi-Cal billing disallowance rate
 - Penetration rates by age group, race/ethnicity, region
 - Number and type of grievances/complaints filed and status
- Examples: could provide key data points on the above as available
- Context: could provide previous data to depict trends

Topical Areas of Interest

- Concept: a report on emerging issues, initiatives or programs of interest
- Possible Performance Indicator: current status of issue, program or initiative
- Examples:
 - Electronic Mental Health Record System
 - Tele-psychiatry
 - Continuum of Care Reform Implementation
 - 24/7 Mobile Crisis Response Team
 - Family Volunteer Support Network
 - First Hope Expansion
 - Mental Health Supportive Housing Plan