

## **November 18 and 19, 2004 Data Infrastructure Grant Regional Conference Calls:**

*Northeast Call at 11:00, and Western Call at 4:00 (EST) 11/18/04  
Midwest/Southern Call at 12:00 11/19/04*

### **The major agenda items for the calls:**

- 1) December 1, 2004 Block Grant Implementation Reports (John Morrow, CMHS)
- 2) Frequently Asked Questions about the URS Reporting (Ted Lutterman, NRI)
- 3) Update on the Functioning/Social Connectedness Measures Workgroup (Bernadette Phelan and Ted Lutterman)
- 4) Update on other DIG Workgroups
  - a) URS/DIG Output Report Workgroup (to provide ideas for new Output Tables)
  - b) SMI/SED and Prevalence Workgroup
- 5) Plans for the National DIG Meeting on February 8-9, 2004.

### **John Morrow and Marie Danforth from CMHS reviewed the December 1, 2004 MH Block Grant Implementation Report Deadline:**

1. State Implementation Reports are due to CMHS by no later than December 1, 2004. This does not mean “postmarked” by December 1. Documents must be received by CMHS by December 1, 2004
2. The State Data Reporting Capacity Checklist should be submitted as part of the Implementation Report. States are also encourage to send a copy of this report directly to the NRI’s SDICC if they elect to use a paper submission of their MHBG Implementation Report and URS data.

### **Ted Lutterman, from the NRI’s SDICC Reviewed the Reporting for December 1, 2004 Communications:**

3. Notes from last month’s Regional DIG calls have been posted on the same site: <http://www.nri-inc.org/SDICC/SDICC.cfm>. Each month, the NRI’s SDICC will prepare a summary of the discussions from the 3 regional DIG calls and will post them to the website.
4. A “Frequently Asked Questions” document that lists questions and answers about how to report and complete the 2004 URS tables has been developed and was e-mailed to the DIG listserv on 11/18/2004. This document can be electronically accessed at: <http://www.nri-inc.org/SDICC/SDICC.cfm>
  1. The FAQ document will be updated regularly as new questions are received from states and CMHS approves the answers.

## Reporting URS Data:

5. **Table 1: Prevalence of SMI and SED:** This table uses information provided from CMHS, but states were concerned about how to use this information in two areas:
  1. Table 1 is supposed to show rates both Current Year and 3 Years Out, but CMHS has not prepared any estimates for 3 Years Out. What should states do for the 3 Year Column?
    - **Answer:** The SMI/SED Prevalence Group will review this and provide guidance for next year.
  2. The Federal Estimates for Children do not include only one (1) number per state, but instead are two ranges based on Functioning Scores of 50 and 60. What number should states use?
    - **Answer:** The SMI/SED Prevalence Group will review this and provide guidance for next year.
6. **Reporting of Race: Table 2, Table 5, and Developmental Tables:** URS Data:
  - The category “Other Race” that was part of the 2002 and 2003 URS Tables has been dropped due to a change in the Federal Reporting Guidelines for Race. States have asked where should they report people in their systems that have identified as “other race”? We are advising states to (1) include them in the “Race Not Available” cells, and (2) to describe in the Table footnotes/ comments area how many people identified as “other race”.
  - CMHS has indicated that in future years of URS reporting, that they are interested in moving reporting of race to better use the new race categories to compile information on how many people are identified as combinations of race categories. This would move the reporting from an unduplicated count (adding up each category would equal the total) to a duplicated count (adding up all the combinations could be greater than the total based on people with multiple racial identities being counted multiple times).

For example, instead of the current method of collecting how many people were:

Current URS Approach

White only,  
Black only  
Asian only  
American Indian Only,  
Native Hawaiian Only, and  
Multi-race (combination of  
any of the groups above).

Potential new Approach:

White: only or multi  
Black only or multi  
Asian only or multi  
American Indian only or multi,  
Native Hawaiian only or multi, and  
Multi-race (combination of any of the  
groups above).

7. **Table 3a: Homelessness:** A state asked if others are defining or counting homelessness differently for Children? They are concerned that they don't count homelessness well in their child/adolescent mental health system.

- The workgroup on Housing may be asked to provide additional guidance on this issue for 2005 reporting.
8. **Table 8: Mental Health Block Grant Non-Direct Service Expenditures:** One state pointed out that they provide lots of training using MHBG resources. Should they include this on this table and if so, where should they report it?
- **Answer:** It was recommended that they should report Training funded by the MHBG and should report it under the Technical Assistance Line.
9. **Table 16-17: Evidence-Based Practices:** States expressed a concern that there are no children’s EBPs related to school-based services. They would like to have additional EBPs related to school based services
- **Answer:** For December 1, 2004 reporting, states should only report the EBPs listed in Tables 16 and 17. The EBP workgroup will review the list of EBPs recommended for reporting and will consider recommending additional EBPs for reporting in 2005.
10. **Table 18: Atypical Medications:** A couple of states have called to report that they are using some new Atypical medications that are not on the Table 18 list of atypicals. The FDA has approved several new Atypicals that are being used by states. States are encouraged to report all new atypicals that are being used and list the medications reported in the table notes.

### Workgroups Reports:

**11. Existing Workgroup Reports: Social Connectedness/Functioning Workgroup:**

This workgroup has held several meetings with states about these 2 new SAMHSA Core Outcome Measures. These meetings have led to refining the focus of the two measures—they are (1) Improvement in Functioning and (2) Social Connectedness. The group surveyed the states about their current collection of these and found over a dozen states regularly compile information about functioning and symptoms, but that every state was using it’s own instruments.

- The workgroup is currently developing operational definitions and options to gather data for each of these measures. The workgroup will identify specific questions that can be tested as part of the Consumer Survey process, and will also test methods that allow states that use standardized instruments to report data from those instruments.
- The workgroup is coordinating its efforts with other SAMHSA efforts, such as the Co-SIG grants, and the CSAT Substance Abuse Block Grant reporting, as well as with the MHSIP Quality Report and the Consumer Recovery Workgroup. The goal is to develop one set of measures consistent across SAMHSA.
- On Functioning Improvement, the workgroup is looking at the current Outcomes questions in the MHSIP Consumer Survey and is looking at additional questions to develop a more robust domain.
- On Social Connectedness, the workgroup is looking at several existing surveys that compile information on social connectedness. The workgroup is also

coordinating with the Consumer Recovery workgroup to assess if questions in the ROSI (Recovery Orientation Systems Instrument) would relate to the concept of social connectedness.

- The workgroup will have specific questions identified by the end of December 2004, and will then work with states to pilot test these new measures during early 2005. The goal is to have working measures for both Functioning and Social Connectedness during 2005

#### **12. EBP Workgroup:**

- The EBP workgroup will meet in early 2005 to assess the experiences of states reporting URS data in December 2004. The EBP workgroup may also help design a session on EBPs for the National DIG Meeting in February 2005.

#### **13. Outcomes: (Criminal Justice, Juvenile Justice, and School Attendance)**

- Several states are currently testing the new consumer survey questions from this workgroup. The workgroup will reconvene after these states have completed their studies and data are available for analysis.

#### **14. DIG Output Reports Workgroup**

A new workgroup has been proposed that will focus on refining the existing URS Output Reports and developing new Output Reports useful to states. The workgroup will start work this December and will develop model reports for the December 1, 2004 URS Reporting data. Several states have volunteered to participate in this workgroup. Both State MH Planners and MIS staff are encouraged to participate. Several states have agreed to also identify members of their state's planning council to participate in this workgroup. Current volunteers are:

| <b><u>PERSON</u></b>                       | <b><u>State</u></b> |
|--------------------------------------------|---------------------|
| Kevin Conley                               | New York            |
| Jay Yoe                                    | Maine               |
| Heidi Johnson                              | New Hampshire       |
| Ellen Sparks                               | South Carolina      |
| Mary Smith                                 | Illinois            |
| Tessie Smith                               | Mississippi         |
| Debra Kupfer                               | Colorado            |
| Kevin Crowe                                | Nevada              |
| Planning Council Member (to be identified) | Connecticut         |

#### **Dr. Gonzalez, CMHS reviewed the plans for the upcoming National DIG Meeting:**

#### **15. National DIG Meeting: Baltimore, Maryland, February 8-9, 2004**

Dr. Gonzalez discussed a proposed agenda for the National DIG Meeting to be held on Tuesday, February 8 and 9, 2004 in Baltimore, Md. Each states is expected to use some of their DIG grant resources to cover the costs of a state MH planner and state data person to attend the DIG meeting.

Additional areas discussed to include on the meeting agenda include:

- How do the mental health block grant DIGs and URS tables relate to the substance abuse block grant DIGs and reporting requirements?
- How are states implementing, counting and reporting Evidence-based Practices? How does this impact URS reporting?
- How are states linking mental health data (SMHA) with data from other agencies (such as education, corrections, Medicaid) to complete URS tables?
- How does the MH Block Grant Application, core measures initiatives, and expectations that states start setting “targets” for performance relate to the URS and DIG efforts?

The National DIG meeting will start at 1:00 on Tuesday, February 8, 2004 and will immediately follow the NRI's 15<sup>th</sup> Annual Conference on State Mental Health Agency Services Research. This year's NRI Conference will focus on three major themes: (1) Recovery, (2) Evidence-based Practices, and (3) Co-occurring mental health and substance abuse services. Copies of the agenda for the NRI conference are available at: [www.nri-inc.org](http://www.nri-inc.org). CMHS has indicated that states will be able to use their DIG Grant resources to cover the hotel costs for the additional nights of the NRI conference.

#### **16. Next DIG Regional Calls**

1. Northeast: Wednesday, 12/15/04 at 11:00 Eastern
2. Midwest/Southern: Wednesday: 12/15/04 at 2:00 Eastern
3. West/Territories: Wednesday: 12/15/04 at 4:00 Eastern