

# CMHS/SAMHSA Data Infrastructure Grants/ Uniform Reporting System Regional Conference Call Report November 3, 2008

Group 1 – Northeast, 11AM

Group 2 – Midwest/Southeast, 2PM

Group 3 – Western/Pacific/Territories, 4PM

**Meeting Facilitator: Olinda Gonzalez, Ph.D (CMHS)**

Meeting Summary Prepared by State Data Infrastructure Coordinating Center (SDICC) at NRI

**For more information contact:**

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## Agenda:

1. **Review of Financial Status Reports and other grant processes, Roger George, SAMHSA Grants Management Specialist**
2. **Discussion of December 1, 2008 URS Reporting Issues**
3. **DIG Workgroup Reports**
  - **Children’s Evidence-Based Practices Workgroup Report**
  - **Criminal Justice Workgroup Report**
  - **DIG Supplement (BRFSS) Workgroup Report**
4. **Update on the Client Level Mental Health NOMS Pilot Project**
5. **Upcoming Training: Data Integrity TA Workshop: November 13-14, 2008**
6. **Planning for the DIG Annual Meeting (April 2009)**
7. **Next Monthly Regional Calls (December 16, 2008)**

1. **Review of Financial Status Reports and other grant processes, Roger George, SAMHSA Grants Management Specialist:** Mr. George reviewed several of the grants management reports that are due regarding the state DIG Grants.
  - a. **Financial Status Report:** This report is due by December 31, 2008 and must include final expenditures incurred during the year.
  - b. **Carry Over Requests:** Rules for requesting a carry over of grant funds have been modified. States no longer have to apply for a carry over each year, but instead only need to request a carry over once (if they need such a carry over). If requesting a carry-over, please submit with Financial Status Report in December 2008; otherwise all Carryover requests for un-spent year 1 funds should be requested by February 1, 2009.
  - c. **Requests for No Cost Extensions:** in response to a question from a state, Mr. George reported that because the DIG grants are in year 2 of 3 year grants, that it is premature for any state to request a No Cost Extension. Requests for extensions will not be considered until during year 3 of the grants.
2. **December 1, 2008 URS Reporting Issues:**
  - a. Deborah Baldwin (CMHS) discussed that as in prior years states are required to have their SMHA Director/Commissioner complete and return the “Commissioner’s Preference Form” indicating that they will be sending in data electronically (either via the SDICC prepared Excel Spreadsheet or via the on-line data entry system). A copy of the Commissioner Preference Forms were e-mailed to both SMHA Directors and the DIG listserv on November 3, 2008.

Please contact Deborah Baldwin at [Deborah.baldwin@samhsa.hhs.gov](mailto:Deborah.baldwin@samhsa.hhs.gov) if you need a new copy of this form.

- b. Ted Lutterman (SDICC) discussed that states have received copies of the 2008 reporting Excel spreadsheets (and additional copies can be downloaded from the web at: [http://www.nri-inc.org/projects/SDICC/urs\\_forms.cfm](http://www.nri-inc.org/projects/SDICC/urs_forms.cfm)). In addition, the on-line data entry system is already up and ready for states who elect to submit data on-line: <http://www.nri-inc.org/sdicc/sdicc08/sdicc08password.cfm>. States can use the same password that they used in prior years to enter or edit data. If you need a new password, contact Robert Shaw at the SDICC at 703-682-9475 or via e-mail at [Robert.shaw@nri-inc.org](mailto:Robert.shaw@nri-inc.org).
- c. States with any questions about interpretation or reporting of URS data are asked to contact Ted Lutterman at the SDICC.

### 3. DIG/URS Workgroup Reports:

1. **EBP Workgroup:** Jeanne Rivard (NRI): The workgroup is completing their work to prepare a new Optional URS table to allow states to report on their provision of additional Children's Evidence Based Practices. A draft Optional Table to compile this data was sent to the DIG listserv prior to the call. The proposed table gathers information related to the two (2) separate National Outcome Measures (NOMS) that SAMHSA has been calculating related to mental health EBPs
  - a. Percent of Children receiving any EBP Service
  - b. Number of Different Child EBPs being promoted by states. This section includes a list of a number of new children's EBPs and gathers information regarding if the state is promoting the EBP, how many programs exist, and if Fidelity is being measured.

The Optional table is designed so states could report either part A and/or part B. The workgroup will have a final call during November to finalize the proposed table and will then forward it to CMHS for consideration of adding to future URS reporting.

2. **Criminal Justice DIG Workgroup:** The workgroup is exploring options to improve the URS measure of "Reduced Criminal Justice Involvement". A subcommittee of the Criminal Justice NOMS Workgroup during October to develop a short survey of SMHAs that will ask states if they have access to data on various potential measures related to criminal justice involvement. The Workgroup is using the Sequential Intercept Model that has been used by SAMHSA for a number of their mental health diversion program initiatives to guide the focus on various locations where mental health consumers interact with parts of the criminal justice system .
  1. Police
  2. Courts
  3. Corrections (local jails, detention centers, prisons)
  4. Community Corrections (probation and parole)

Several State participants on the Regional calls supported the use of the Sequential Intercept Model for focusing the survey. The full Criminal Justice Workgroup will have a conference call during November to finalize the proposed survey, which will then be sent out to the DIG listserv.

3. **The DIG Supplement Work Group:** Bernadette Phelan (SDICC) reported on the workgroup activities. During October, the workgroup held a conference call during which Rosemarie Kobau, MPH of the CDC presented results of the Stigma module questions asked during the recent BRFS.

Ms. Kobau examined the distribution of each stigma question by demographic characteristics of survey respondents (i.e. by gender, age, income, education, and race), by State, and by the mental health status of survey respondents (i.e. showing differences in opinion of persons with and

without Serious Psychological Distress, of persons with and without Frequent Mental Distress, and of persons receiving or not receiving mental health service treatment). Although a high percentage of respondents were reported to be in agreement with the first question (88% of total respondents), "Treatment can help people with MI lead normal lives," a lower percentage of respondents were in agreement with the second question, "People are generally caring and sympathetic to people with mental illness." The rate was 57%.

The last few minutes of the conference call were facilitated by CMHS to gather State opinion in the administration of the mental health BRFSS modules. CMHS was interested to get feedback from States on the usefulness of implementing the modules in alternating years, i.e. PHQ-8 implemented in one year and K-6 the following year; other questions or modules that CDC and CMHS may consider for future implementation (e.g., PTSD module); and other related issues that States may have encountered

4. **Upcoming Training: Data Integrity TA Workshop: November 13-14, 2008:** Ted Lutterman reported on workshop on techniques and approaches to improve the quality and integrity of data reported to the SMHA and used for URS and other reporting. This will be a one and ½ day workshop in the Washington, DC area on November 13-14, 2008. Topics that will be covered include:
  - **Concepts of Data Integrity and Quality:**
    - Aspects of data integrity and data quality
    - Importance of data integrity and quality
    - Problems/issues that compromise integrity and quality of data
    - Strategies in pinpointing data issues
  - **Mechanisms to Enhance State Data Quality:** 'Scrubbing' the Data and Building Data Edits
  - **Conducting Data Audits**
    - Audits by the SMHA as part of licensure and certification
    - Audits Using An Outside Contractor
    - Having Providers conduct audits with the state
  - **Using Performance Contracts that focus on Data Quality**
  - **Setting the Standards and CQI of Data Quality and Integrity**
  - **Using Data Collaboratives with Providers to Enhance Data Quality**
    - Training Providers on Data Quality

The SDICC is planning to put together a CD that will include examples from states of data edit routines, protocols for conducting provider data audits, samples of performance contracts with providers regarding data, examples of performance reports or other output reports used to improve data quality, and similar activities. The SDICC requested states that are willing to share documents related to their approaches to improving data quality/integrity to send copies to Ted Lutterman at [ted.lutterman@nri-inc.org](mailto:ted.lutterman@nri-inc.org). After the workshop, presenter PowerPoint slides and other workshop materials will be made available to other states.

5. **Update on the CMHS-funded Client Level NOMS Pilot Project:** Ted Lutterman reported that the Client Level Pilot (CLP) is working with SAMHSA and 9 SMHAs to develop and test the reporting of de-identified client level data to generate the mental health NOMS. The NRI and states have completed the development of the reporting protocol, including specific data elements to be reported, their coding scheme, and record layouts. Once the data protocol is approved for release, a copy will be made available to other states who wish to see the record layouts. The nine pilot states are currently preparing to submit test files of client data and the first year reporting (T1) will be completed in early 2009.

6. **2009 DIG Annual Meeting:** The 2009 DIG Annual Meeting will be moved back from February to April in 2009. The DIG Annual Meeting will be held on April 16-17, 2009 at the Grand Hyatt Hotel in Washington, DC. The 2009 DIG meeting will immediately follow the NRI's Annual State Mental Health Agency Services Research and Evaluation Conference. Olinda reminded the calls that as part of each state's DIG grant the state is required to send their state DIG representative and a state mental health planner to the DIG Annual Meeting.

Olinda requested states to recommend potential topics for the DIG Annual meeting and requested volunteers to serve on a Conference Planning Group. Please contact Olinda Gonzalez at 240-682-9463 or [Olinda.gonzalez@samhsa.hhs.gov](mailto:Olinda.gonzalez@samhsa.hhs.gov) if you would like to volunteer for the Planning Committee.

During the Regional Calls, several suggestions were made for topics/sessions at the Annual Meeting:

- What is the Future of the NOMS?
- How can URS data be used for Planning and the MHBG?
- Repeat the Poster Session on how states are using URS data
- Highlights of Recent Changes in the MHBG Application

**7. Next Monthly Regional Calls:**

The next set of DIG Regional Conference Calls are scheduled for Tuesday, December 16, 2008.

11:00 EDT	Northeast Region
2:00 EDT	South and Midwestern Regions
4:00 EDT	West and Pacific Jurisdictions

**Note:** Due to the timing of the September (9/30) and November (11/3) Regional Calls, there were no Regional DIG calls held during October, 2008.