

State: _____ Contact: _____

2006 STATE MENTAL HEALTH AGENCY PROFILING SYSTEM

The State Mental Health Agency (SMHA) Profiling System has been developed by the National Association of State Mental Health Program Directors Research Institute (NRI) in collaboration with NASMHPD and the State Mental Health Agencies. The SMHA Profiling System is supported by a contract from the Division of State and Community Systems Development, Center for Mental Health Services (CMHS) (contract No. 280-03-3203). This cycle updates information compiled from the States two years ago and expands systems knowledge in areas where substantial requests for additional information have been received from the States. New this cycle is web-based data entry. The components can be completed on our web-site: <http://www.nri-inc.org> or by sending back completed paper sections of the Profiles.

The purpose of the SMHA Profiling System is to develop and maintain a centralized, computer-based compilation of descriptive information about the organization, funding, operation, services, policies, statutes, staffing, and consumers of SMHAs. The Profiling System was originally proposed by the SMHA directors as a mechanism to systematize the compilation, storing, and retrieval of information about SMHAs, to facilitate its acquisition and use, and to minimize the burden on States in responding to periodic ad hoc surveys from NASMHPD and others. This cycle builds upon the content of prior cycles to update information. Once the data is collected, it will be available on our web-site. Data from earlier cycles are available now at: <http://www.nri-inc.org>.

Wherever data are available from existing sources, such as the U.S. Census, the NRI SMHA Revenue/Expenditure study, and the CMHS Inventory of Mental Health Organizations, such data will be incorporated into the Profiling System so as to minimize the data compilation required of the States.

The information compiled through this cycle of the Profiles project will be available to SMHAs and the general public in several formats. The information will be electronically available to users via computers via the Internet. SMHA employees will also be able to call the NRI to request information from the Profiles and special analyses will be prepared for the States. Please return the completed Component to the NRI by April 3, 2006.

XI. Information Management Component

All State Mental Health Agencies support information management functions. These functions have evolved differently in each State, depending on the organization of mental health within the State's government and the value placed on quantitative information at all levels of decision making. Most States are involved in efforts to enhance information systems to make data more relevant to decision making. Major new developments in information systems technology are factors contributing to the growth in information systems within the public mental health system. The Information Management Component of the SMHA Profiling System is designed to describe the current state of this function and to track its development over time. The component provides for a systematic compilation of the organizational placement of information functions, the level of integration of these functions, and funding and staffing of information functions.

Please respond to each question as thoroughly as possible. Please report data for your current activities or your most recently completed fiscal year (FY 2005). When data are not available, please indicate this on the form and continue to the next question. Please direct any questions you have to Robert Shaw or Ted Lutterman at 703-739-9333 or e-mail us (robert.shaw@nri-inc.org or ted.lutterman@nri-inc.org).

Definitions appropriate to the Information Management Component:

SMHA -- According to National Association of State Mental Health Program Directors (NASMHPD), the State Mental Health Agency (SMHA) is defined as the state agency which the Director/Commissioner who represents the State to NASMHPD has authority. If your State has placed the control of State mental hospitals and community mental health programs into two separate agencies, please respond for the agency with the community responsibilities (e.g., Wisconsin - Office of Mental Health or Colorado - Division of Mental Health).

Information Management (Decision Support Systems) -- Information management and decision support systems are broadly defined to include a range of functions, such as information system planning and development, data processing, system management and maintenance, reporting requirements and standards, systems output reports, and data used to support management and clinical decision making.

Client Tracking -- Client tracking refers to the capability of an information system to uniquely identify a specific individual who receives services within a system of mental health services and identify all occasions when and where services are provided.

State Funds -- State funds represent funds from State money appropriated to support the functions of the SMHA and its service provider organization.

Federal Funds -- Federal funds represent all federal money (grants and contracts) that support information management functions through the SMHA.

Other Funds -- Other money that supports information management functions, such as foundations.

INFORMATION MANAGEMENT COMPONENT

1. **What is (are) the organizational location(s) of the information management functions(s) (operations) for the SMHA?** *(Check location(s) and specify where)*

- a. Within the SMHA **If within** the SMHA, (specify)_____
- b. Outside the SMHA **If outside**, (specify)_____
- c. Shared between the SMHA and other agency **Organization Name**_____

d) Where are the information management functions located? *(Check all that apply)*

	Within the SMHA	Outside the SMHA	Shared between the SMHA and other agency
Management and operation of computers	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Data management, such as updating, quality control, etc.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

2. **Does the SMHA database system provide for client tracking across State hospitals and community-based service providers?**

- Yes No

a. If yes, type of identifier used to track: *(Check all that apply)*

Type of Client Identifiers	State Psychiatric Hospitals	Community Mental Health Programs
1. Social Security Number	<input type="checkbox"/>	<input type="checkbox"/>
2. Assigned Identifier	<input type="checkbox"/>	<input type="checkbox"/>
3. Constructed Identifier	<input type="checkbox"/>	<input type="checkbox"/>
4. Other Identifier: _____	<input type="checkbox"/>	<input type="checkbox"/>

b. Is the Same Identifier used for state psychiatric hospitals and community providers?

- Yes No

3. **Is the State Medicaid paid claims database available to the SMHA for analysis?**

- a. Yes No

b. If yes, how have you used this data?

1. For analysis of mental health services? Yes No
2. For linking to SMHA client level data for administrative purposes? Yes No
3. For linking to SMHA client level data for policy analysis? Yes No

4. **Has the SMHA integrated/linked its client datasets with client datasets from any other agencies?**

- a. Yes No

b. If yes, what agencies have you integrated client level data with

1. Alcohol and Drug Abuse Yes No
2. Medicaid Yes No
3. Criminal Justice Yes No
4. Other: _____ Yes No
5. Other: _____ Yes No

5. Does your SMHA maintain an individual client-level database for consumers served in community mental health settings?

a. Yes No

b. If yes, Do you receive this unique client information for all community programs, or only some programs?

i. Yes No All Providers

ii. Yes No Only some providers: Describe: _____

c. How often are individual client data submitted to the SMHA?

i. Yes No At Admission

ii. Yes No Updated Annually

iii. Yes No Updated some other period: specify: _____

iv. Yes No At Discharge

v. Yes No Data are collected after discharge (e.g., employment status 30 days after completing services)

d. What types of Client Information are maintained in the client database?

Measure	Admission	Discharge	Updated: frequency: __ Months	Comments on Measure:
1. Primary Diagnosis	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No		
2. Co-occurring Substance Abuse Diagnoses/problems	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No		
3. Employment Status	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No		
4. Criminal Justice Involvement (arrests)	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No		
5. Living Situation	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No		
6. Social Connectedness	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No		
7. Functioning Status	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No		
8. Symptoms	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No		
9. Consumer Recovery Measure	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No		
10. School Attendance (for children)	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No		
11. Other (specify: _____)	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No		

e. Discharge Data: Some States report the majority of clients they serve are long-stay and do not have a discharge record during a 12 month period. Other clients may receive services for a while, and then stop coming for a while...leading to a "discharge record" for someone who has not completed services. Does your state MIS collect client level data on the number of persons who are:

i. Discharged as having completed services

Yes No

1. If yes, how many clients had a discharge as completed services last year _____, What percent of clients does this represent? _____%

ii. Discharged as having stopped coming, but have not completed treatment

Yes No

1. If Yes, how many days after a client last receives service do you generate a discharge record? _____ days

2. If yes, how many clients had a discharge last year _____, What percent of clients does this represent? _____%

iii. Other Discharge Status:

Yes No if yes, describe _____

6. What is the address of your website? _____
If your website includes performance outcome reports, please provide the address of where these reports can be found.

Please provide the following information for the contact person who completed this component:

Name: _____

Title: _____

Address: _____

City: _____ State: _____ Zip: _____

Telephone: _____ Fax: _____

E-mail: _____

When this component is completed, you may enter the data on-line at <http://www.nri-inc.org> (a report will be sent to the commissioner) or you may return it to the State Mental Health Director's office.

Commissioner Sign off _____

Each State Director's office should collect all of the components, review them for content, and forward them to:

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