

**DATA COMMITTEE  
MONTHLY MEETING MINUTES  
November 6, 2019 – Final**

<b>Agenda Item / Discussion</b>	<b>Action /Follow-Up</b>
<p><b>I. Call to Order / Introductions</b> Committee Chair, Cmsr. Joe Metro, called the meeting to order @ 3:2711pm</p> <p><u>Members Present:</u> Chair- Cmsr. Joe Metro, District V Cmsr. Doug Dunn, District III Cmsr. Barbara Serwin, District II</p> <p><u>Members Absent:</u> Cmsr. Sam Yoshioka, District IV</p> <p><u>Other Attendees:</u> Warren Hayes, Mental Health Program Chief Lisa Cabral, BH Admin. Senior Clerk (filling in for Executive Assistant) William Berlingieri, BH Medical Doctor</p>	Complete Audio Recording available
<p><b>II. PUBLIC COMMENTS--none</b></p>	
<p><b>III. COMMISSIONER COMMENTS-</b> J. Metro mentioned the progress Behavioral Health has made regarding getting significant data managed to paint the story of how county spends its money, how the county is supporting mental health services to individuals, and how we can continue to make incremental changes going forward.</p>	
<p><b>IV. Approval of September 4, 2019 minutes.</b></p> <ul style="list-style-type: none"> <li>• D. Dunn moved to approve the minutes, seconded by B. Serwin</li> <li>• Vote:3-0-1</li> </ul> <p><b>Ayes:</b> D. Dunn, J. Metro (Chair), B. Serwin, <b>Absent:</b> S. Yoshioka</p>	<p><b>Agendas and minutes can be found at:</b> <a href="https://cchealth.org/mentalhealth/mhc/agendas-minutes.php">https://cchealth.org/mentalhealth/mhc/agendas-minutes.php</a></p>
<p><b>V. DISCUSS Updates to current draft of Director’s Report model-</b> with Warren Hayes, MH Program Chief</p> <ul style="list-style-type: none"> <li>• W. Hayes advised that the idea is have the ad-hoc data committee should reach out to the Mental Health Commission general meeting regarding the work that has been done and how to gain additional input and what should be discussed on the December agenda. All performance indicators have been included in the Current Director’s Report FY 18-19 and the other significant event since last meeting was to engage the Behavioral Health (BH) Director, who has endorsed the structure of the narrative which is representative of the county initiatives. W. Hayes discussed that the BH system has not had this type of report and comprehensive data structure which has led to productive discussion to help create a data dashboard. The BH Director has been in talks with Data Operations and Information Technology (DoIT) to help with project efforts moving forward.</li> <li>• J. Metro inquired of how funding is aligned with the metrics or aligned with other counties in these key performance indicators. W. Hayes explained that a large quantity of data is available to satisfy State and Federal mandates requiring counties to provide mental health services.</li> </ul>	

<p>W. Hayes explained the standards of the EQRO audit and that there are overlaps with other systems or audits. W. Hayes explained about Measurements, Outcomes and Quality Assessment (MOQA), which is a Program Data Collection Tool designed to be completed once a year. There is a MOQA workgroup that tries to come up with standardized processes across domains; and goal to have comparisons between counties and utilize this analysis to understand where to allocate resources. The State is working on CalAim which is a Medi-Cal reform gearing towards performance and will result in greater integration between primary care and behavioral health.</p> <ul style="list-style-type: none"> <li>• J. Metro inquired to find out which performance indicators are State mandates. W. Hayes discussed, looking at the BH Director’s report, that B) Access to Services (how soon an individual receives a psychiatric appointment) and G) Quality Assurance - Customer Satisfaction Surveys are State mandates; and G) Quality Assurance - % of Persons in Contra Costa who are seriously mentally ill and poor is State tracked and reporting uses the same metric for all counties. Dr. Berlingieri mentioned that the Affordable Care Act states that the Federal poverty level is \$17,000-18,000 up to 33% and the lower percentage of Medi-Cal individuals is under the State average. J. Metro inquired if a line showing the 4% established on the graph to understand the percent of individuals in poverty on pg. 25.</li> <li>• W. Hayes discussed the access to services data is generated by the county. J. Metro inquired if there was a platform that would should how each county performs against other counties. W. Hayes discussed how the possibility of a performance driven system and may lead resources away from those who needs it the least. W. Berlingieri explained that when performance has increased, spending will go down. J. Metro discussed the different degrees of how an individual is diagnosed such as severe and gravely disabled. W. Hayes explain that the adult system of care previously utilized the LOCUS but is switching to the Adult Needs and Strengths Assessment (ANSA) and individuals need to meet medical necessity and if they meet medical necessity, then a clinician will diagnosis the individual in order to receive mental health services.</li> <li>• W. Hayes explained that the individuals who are diagnosed as mild to moderate are not included in the data. W. Hayes explained on pg. 10, there is a macro summary of the performance indicators in the director’s report and under Service Impact, there is mentioned of significantly high percentage of costs going to locked facilities. J. Metro requested to add the three State mandated performance indicators to pg. 10. W. Hayes explained that an additional change was combining graphs and data to help go through the seven performance indicators more efficiently. J. Metro questioned if we could show the overall trend on the graphs. W. Hayes will continue to be in discussions with DoIT regarding a data management system which can be accessed by all.</li> </ul>	
<p><b>VI. REVIEW summary of Data Committee input and recommendations</b></p> <ul style="list-style-type: none"> <li>• J. Metro mentioned recidivism of how many times clients are reappearing in the system. D. Dunn inquired about what percent of clients are part of inpatient conservatorship in the county and out of</li> </ul>	

the county. J. Metro requested to meet outside of the Data committee to continue to understand the product of the director's report that will need to be presented to the full commission meeting, emphasis on, and W. Hayes has created a PowerPoint.	
<b>VII: Adjourned Meeting at 4:27pm</b>	