Meeting: Children's Behavioral Health Data and Quality Team

Date/Time: February 20, 2015, 1-3pm

Agenda Item & Lead(s)	Discussion and Outcomes	Action to be taken by whom/when
Updates and announcements RDA Reports on homelessness in school-age kids and Youth at Risk of Homelessness RDA Report on Risk and Protection Profiles for Substance Abuse Prevention	https://www.dshs.wa.gov/sites/default/files/SESA/rda/documents/research-11-214.pdf https://www.dshs.wa.gov/sites/default/files/SESA/rda/documents/research-7-106.pdf https://www.dshs.wa.gov/sesa/research-and-data-analysis/community-risk-profiles	Committee members were encouraged to read these reports. If any committee member would like to discuss the findings or implications in the homelessness reports in more depth Melissa Ford Shah can be invited to a meeting.
Education data on MSP updated? What is the gap? Can the committee facilitate progress?	A question was raised about the indicators on school success on the Measures of Statewide Performance which have not been updated since 2008. Barb Lucenko reported that RDA is almost ready to add several years of data to these indicators which will bring them more up to date. Data on those taking/not taking the test are also relevant for our purposes as many children/youth with behavioral health needs do not take the test. *Follow-Up:* More information on the exemptions for the varied statewide assessments: The rules are slightly different for those in grades 3-8 and those in grade 11. While the tests are "required" a parent can opt to not have their child tested on any of the grade 3-8 tests with no consequence. If their child does not take the 11 grade assessments (and meet standard) they will not graduate with a HS diploma. There are two waivers: (1) for "the most significant cognitive disabilities" (which is considered to be 1% or less of the population and (2) English Language Learners are except from the English test if it is also their first year in an American school. There are many alternative testing formats. Relevant data points collected by OSPI include: • Number tested	RDA will develop further analyses of school data including data on discipline. (A committee member pointed out that discipline data can reflect resources available to a school. Those with counselors have fewer reported disciplines as they do not end up in the vice-principles office like they do in schools without counselors.) Other analyses will be to subgroup those with substance abuse and co-occurring disorders, look to data on post-graduation outcomes, including GEDs

	• Number not tested • Number met standard (disaggregated by level, also) • Number met standard on first try • Number met standard on retest.	
Committee Expectations for reviewing performance measures, reports and other information. (Charter attached for review) Katie Weaver Randall Goal: Establish an expectation for review of and feedback on Measures of Statewide Performance, WISe QMP Quarterly Reports and other data as relevant.	What concrete actions do we as a committee need to take to act on the data we receive. It was suggested that an annual work plan would help us anticipate data review needs. DBHR is developing a quality plan which will be shared. CMS requires that this be developed conjointly with HCA.	Katie and Kathy will develop a work plan for committee review. The work plan will include expectations that members follow-up with their leadership to drive change. Feedback loops will be built in to specify when, where and how to share and act on information. Language on the charter will also be updated and clarified. Colette will discuss with HCA administration to facilitate a collaborative process.

Measures of Statewide Performance
Barb Lucenko, Bridget Lavelle
     Updated version
     Measurement of Goal 6.1
"The system provides a comprehensive and accessible array of services for children, youth and families"
 	
Goals: Get system-wide perspective on service array; Designate a workgroup to draft recommendation for indicator(s).
	There was much discussion on whether this indicator should be developed by analyzing services offered or by identifying system gaps in services, ie, at the individual service delivery level or the level of the system-side array and how this would be measured over time. One approach is to initially map what the system has and identify gaps and then measure the gaps and monitor change over time.
	
	A suggestion was made to look at the system of care categories of services as well as conceptual underpinnings if we choose to do a system evaluation. Raetta Daws mentioned a network capacity assessment tool that was used by Optum-Pierce to try to identify their service gaps. She will share. What story are we trying to tell with this indicator? How can it be used to improve the system? What other ways are there to examine barriers to and gaps in services? These might include staffing, the location of service delivery and other.
		More information about Systems of Care is contained in the System of Care Primer http://gucchd.georgetown.edu/products/PRIMER2ndEd_FullVersion.pdf
		
		The System of Care Evaluation Team will begin this analysis. Eric Chambers and Bruns would also like to be involved. Committee input will be solicited.

Next meeting • March 20, 1-3pm • Possible Agenda Items o Measures of Statewide Performance- concerns and successes for each	Draft annual work plan Charter update will be sent out by email with agenda.	

system partner. Prioritize committee focus o	Another take on 6.1, 6.2 – send thoughts in the interim to Kathy.	