CALIFORNIA DEPARTMENT OF
Mental Health

1600 9th Street, Sacramento, CA 95814
(916) 654-3551

September 16, 2003

TO: COUNTY MENTAL HEALTH DIRECTORS

SUBJECT: PERFORMANCE OUTCOMES SYSTEM IMPLEMENTATION (2003-2004)

Consistent with a previous letter, dated March 19, 2003, the Department of Mental Health (DMH) is implementing a revised Performance Outcomes System, scheduled to begin in November 2003. The purpose of this letter is to inform counties of the data collection, administration and submission procedures for this implementation, and to request additional contact information from counties. Detailed information regarding the implementation will be available by Monday, September 22, 2003, on the Performance Outcome and Quality Improvement website at http://www.dmh.ca.gov/poqi.

Data Collection:

The first data collection period will be November 3-17, 2003, inclusive. DMH has developed survey forms based on the Performance Outcomes Steering Committee and California Mental Health Planning Council recommendations, Federal Block Grant reporting requirements, Medi-Cal regulations, and county input.

Consumer Perception Surveys:

The consumer perception surveys are as follows:

- Youth Services Survey (YSS) – To be completed by youth, aged 13-18 and transitional-age youth who continue to be tracked within the children's services system
- Youth Services Survey for Families (YSS-F) – To be completed by parent/caregiver of youth up to age 18
- Adult Survey [Mental Health Statistics Improvement Program (MHSIP) Consumer Survey and Quality of Life questions (QOL)] – To be completed by consumers, age 18-59
- Older Adult Survey [Mental Health Statistics Improvement Program (MHSIP) Consumer Survey and Quality of Life questions (QOL)] – To be completed by consumers, age 60 and older

Only official versions of the surveys, Spanish translations, and corresponding data dictionaries should be used. These documents will be available on the DMH website at: http://www.dmh.ca.gov/poqi by September 22, 2003. Translations into several other languages are in process. If transition away from the old MHSIP and/or CAQOL/QLSF surveys for the November 2003 data collection is expected to result in difficulties that cannot be overcome, then counties are urged to contact DMH for possible accommodation.

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www.dmh.cahwnet.gov

Survey Administration:

To the extent that resources are available, DMH recommends that counties use non-staff peer advocates or other volunteers to manage the survey administration and data collection processes during the data collection period. This recommendation is based on a study conducted by the California Mental Health Planning Council that found considerable clinician/service provider involvement in consumer satisfaction survey completion. Consumers expressed concern that they might be treated differently if they answer the survey negatively. As a result, the validity of consumer responses may be impacted when there is service provider involvement. It is believed that the use of peer advocates or other non-staff volunteers will help to reduce any bias.

If counties choose to use peer advocates or other volunteers (who are not employed by the county), counties may need to develop business associate agreements to conform to Health Insurance Portability and Accountability Act (HIPAA) guidelines since they will be handling protected health information. Information on what a business associate agreement should contain is available on the California Office of HIPAA Implementation website at: http://www.ohi.ca.gov/calohi/docs/2002-15_Exhibit_4-BA_Agreement.doc , or, contact your county's HIPAA coordinator or legal counsel who should have standard business associate agreements on file.

Data Submission:

For the November 2003 survey period only, DMH will be accepting original, completed survey forms for centralized data input at DMH. Official-version surveys completed by consumers during this data collection period will need to be sent by mail to DMH and postmarked by December 12, 2003, for processing. Counties that elect not to use these DMH-developed forms may submit the data by January 31, 2004, compiled according to the official data dictionary, through the Information Technology Web Services (ITWS), as has been done previously.

DMH Technology Development:

For the following survey period, targeted for May 2004, DMH will be offering to counties the following three options for reporting data:

(1) web-based, on-line direct data entry (no cost technology option)

(2) web-based scanning and verification system (low cost-to-county technology option)

(3) the traditional Performance Outcomes data file upload method via ITWS

DMH will provide detailed information, demonstrations and regional trainings on the direct data entry and scanning/verification methods following the November 2003 data collection period so that counties may make informed choices regarding future use of one or more of these options. (Note: Counties may continue to choose to compile data according to their own methods as long as counties are able to comply with the data collection elements and data dictionary specifications when uploading data files.)

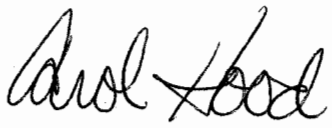
"Performance Outcomes System Contacts" Form
(to be completed and returned to DMH by October 17, 2003):

DMH recognizes that County Mental Health Directors may wish to specify several points of contact, other than themselves, to receive Performance Outcomes System information. As such, DMH requests that contact information be submitted for all key persons who Directors designate to be involved in the implementation of the new data collection methodology. Please complete one "Performance Outcomes System Contacts" form for **each** relevant staff member, and any key peer advocates and/or volunteers. Completed forms may be faxed to (916) 654-3178. *(Note: Response forms may be printed from the DMH website at: http://www.dmh.ca.gov/poqi Please do not photocopy forms.)*

The Department is committed to providing you with effective and flexible methods of collecting and reporting data at a reasonable cost. At this time the Performance Outcomes System is focusing on measuring consumer and caregiver perceptions of services and service impact. In the near future, the web-based, on-line data entry and scanning/data verification technology options offered will also be able to support the capture of data for special studies designed to measure other important mental health service outcomes.

If you have questions about any of the issues addressed in this letter and accompanying documents, please contact Stephanie Oprendek, Ph.D., Chief, Performance Outcomes and Quality Improvement, at (916) 653-3517 or soprende@dmhhq.state.ca.us.

Sincerely,



CAROL HOOD
Deputy Director
Systems of Care

Cc: Members, California Mental Health Planning Council
Members, State Quality Improvement Council