

**DATA COMMITTEE  
MONTHLY MEETING MINUTES  
December 4, 2019 – Final**

| <b>Agenda Item / Discussion</b>  | <b>Action /Follow-Up</b>   |
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| <p><b>I. Call to Order / Introductions</b><br/>Committee Chair, Cmsr. Joe Metro, called the meeting to order @ 3:22pm</p> <p><u>Members Present:</u><br/>Chair- Cmsr. Joe Metro, District V<br/>Cmsr. Doug Dunn, District III<br/>Cmsr. Barbara Serwin, District II</p> <p><u>Members Absent:</u><br/>Cmsr. Sam Yoshioka, District IV</p> <p><u>Other Attendees:</u><br/>Warren Hayes, Mental Health Program Chief<br/>Alexander Ayzenberg, EA for MHC</p>   | Complete Audio Recording available   |
| <p><b>II. PUBLIC COMMENTS -- None</b></p>  |  |
| <p><b>III. COMMISSIONER COMMENTS</b></p> <ul style="list-style-type: none"> <li>J. Metro, on behalf of the Committee, thanked and acknowledged Warren Hayes, Sarah Kennard, Committee members, and others on job well done.</li> </ul>   |  |
| <p><b>IV. Approval of November 6, 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<br/>Ayes: D. Dunn, J. Metro (Chair), B. Serwin,<br/>Absent: S. Yoshioka</li> </ul>  | <p><b>Agendas and minutes can be found at:</b><br/><a href="https://cchealth.org/mentalhealth/mhc/agendas-minutes.php">https://cchealth.org/mentalhealth/mhc/agendas-minutes.php</a></p> |
| <p><b>V. REVIEW updated version of the Director’s Report and remaining domains - with Warren Hayes, Mental Health Program Chief</b></p> <ul style="list-style-type: none"> <li>W. Hayes mentioned that this was the last Data Committee meeting. He acknowledged and thanked Committee members for job well done.</li> <li>W. Hayes mentioned that this report was very important to BHS leadership. W. Hayes talked about that the individual reports and data analysis existed for its specific purpose without being connected to other pieces. That raises the question of validity and reliability of the data. Both validity and reliability need to be thoroughly tested. Despite those questions, the idea of interlinking the data was well received throughout BHS. B. Serwin suggested mentioning one of standalone silo reports to show the difference and positive effect interlinking the data had.</li> <li>One of the end goals is automate this report in the form of the dashboard readily available on internal Health Services website. BHS leadership is working with Department of Information Technology (DoIT) to hire two full time positions, who will exclusively work for Health Services, to automate this report (and handle any ongoing requests/issues moving forward). Once dashboard is built, the ad-hoc requests will be possible to accommodate to drill the data by specific clinic, for example. One will be able to go back few years back to analyze historical data trends.</li> <li>W. Hayes commended the Committee on its input in creating the ‘Purpose’ and ‘Scope’ slides. ‘Purpose’ slide mentions the seven domains covered throughout the report and ‘Scope’ slide explains which public mental health</li> </ul> |  |

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| <p>services are covered in the report (and which services are not covered). D. Dunn suggested expanding the definition of ‘In-patient psychiatric hospitals and facilities’ to show what is included.</p> <ul style="list-style-type: none"> <li>• W. Hayes mentioned that both narrative (‘Part I’) and actual data (‘Part II’) updates are planned to be done on the quarterly basis as he was discussing ‘Report Structure’ slide.</li> <li>• <b>J. Metro motioned for MHC through its Executive Committee to track and monitor progress of the data collection for Director's Report on quarterly basis and to see if any action needs to be taken. B. Serwin seconded the motion. The passed motion will be part of Data Committee’s presentation of Director’s Report to the full commission during January meeting.</b></li> <li>• W. Hayes went over ‘Performance Indicator Summary’ slides saying that they summarized the data related to the seven domains covered in the report. The slides represent a very good overview of where BHS stands in the data world. Mr. Hayes highlighted that there were some notable improvements in few areas, especially stabilizing PES admissions and improving the staffing, including psychiatry. B Serwin suggested putting letters A, B, C and so on next to bullet points on ‘Performance Indicator Summary’ slides for easier reference to the seven domains covered throughout the report.</li> <li>• W. Hayes discussed the slides showing the actual data. During the discussion the following suggestions were made: add up and down arrows to other slides, where applicable (by J. Metro); to remove ‘squares’ on the slides, where ‘State Standard’ line is shown (by J. Metro); make ‘Budgeted’ and ‘Spent’ numbers more visible on ‘D. Finance’ slide (by B. Serwin); to break ‘Adult System Locked Facility’ data point into more specific components like 4C, MHRC, and such, if possible on ‘D. Finance’ slide (by D. Dunn); mention which services are counted as specialty mental health services for this slide on ‘E. Services Provided’ slide (by B. Serwin); make bars 100% and to show billable hours in one color and the rest in different color on ‘E. Services Provided (2)’ slide (by B. Serwin).</li> <li>• The first two ‘Service Impact’ slides do not have fiscal year 2018-2019 data yet; however, hoping to get it prior to MHC January meeting to include the data into the report to be presented to the full commission. The data will be automated in the form of dashboard and exist for all programs. Through already built valid and reliable formula, the data will be able to show the increase or decrease in recidivism for specific individual, group of individuals, or program.</li> <li>• W. Hayes highlighted that the improvement in access to services (number of days from initial request to offered appointment – these numbers are approaching the state standard or already there) was not only due to staffing i.e. hiring more psychiatrists (per budget), but also to paying attention to the front doors of our clinics. Rapid Improvement Events were instrumental in helping to improve this area. W. Hayes mentioned that more clinicians need to be trained on how to bill and get reimbursed by MediCal for specialty mental health services.</li> </ul> |  |
| <p><b>VI. REVIEW summary of Data Committee input and recommendations</b></p> <ul style="list-style-type: none"> <li>• W. Hayes will present ‘Data Committee Input’ document at the next full commission meeting. While presenting, he will recognize the work Data Committee put in to create this Director’s Report.</li> <li>• Data Committee will present the Director’s Report to the full commission during the January meeting. If Committee members have any edits outside the ones discussed during the meeting for either document, they will ideally send them to Executive Assistant before Christmas.</li> </ul>   |  |
| <p><b>VII: Adjourned Meeting at 4:24pm</b></p>   |  |

