Meeting: Children’s Behavioral Health Data and Quality Team

Present: representatives from DBHR, families, RDA, HCA, JJ&RA, DDA, RSNs, CMHAs, CA, Washington Council

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| **Agenda Item & Lead(s)** | **Discussion and Outcomes** | **Action to be taken by whom/when** |

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| **Updates and announcements**  New DSHS website and location for Data and Quality Team postings  Mental Health Questions added to the end of the CAHPS survey of Medicaid children in MCOs (see below) | <http://www.dshs.wa.gov/bhsia/division-behavioral-heath-and-recovery/data-quality-team>  It was suggested that an additional question be added after #3, similar to #4 but for those that answered yes to #3 as the information obtained would be important. | Barb Lantz will take back to HCA and see if this addition can be made this year. If not, will be added prior to the next survey. |
| **QMP Reporting Requirements**  Kathy Smith-DiJulio | The list of reports to be developed for WISe QI purposes was shared. They are derived from the AIM Appendix in the Quality Management Plan. Some are due quarterly, some annually. Processes for developing, acting on and communicating data for improvement purposes will evolve over the next 2 years. It was pointed out that the Quality infrastructure was not very robust as it had never been a contractual requirement. | QMP to be fully implemented by December 2016. DBHR and RDA working on report development, DBHR clarifying system-wide accountability for QI.  Cross-system measures will be brought to this group for action. |
| **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” | The latest version was shared. Minor changes were made.  Barb Lucenko reported on a meeting with the Children’s Behavioral Health Executive Leadership Team where the Measures of Statewide Performance were reviewed. Requests were made for reports focused on specific populations as well as different ways to analyze the data, e.g., expanding definitions or drilling down for specific information on one measure.  A lively discussion ensued about the impact of behavioral health on physical health (for those affected, their parents and siblings) and what sort of measures might be collected to inform us of the impact and help us target improvement efforts. E.g., psychotropic meds have side effects including obesity; trauma has both physical and behavioral consequences.  The need for collaboration with primary care was emphasized. | RDA will soon be publishing reports on homelessness among the school age population and predictors of homelessness for youth aging out of foster care.  RDA is also working on Measures of Statewide Performance for subpopulations, e.g., children and youth in WISe, youth in foster care. |
| **Next meeting**  February 20, 1-3pm  Agenda:   * Measurement of Goal 6.1 “The system provides a comprehensive and accessible array of services for children, youth and families” * Clarify expectations for committee around process for reviewing performance measures, reports and other information. * Other TBD |  |  |

Dear plans,

**Please share this with your QI/CAHPS managers.**

Here are the HCA supplemental questions for the 2015 Child and Child with Chronic Conditions CAHPS survey.  They were developed by Kathy Smith- DiJulio and colleagues at DSHS including staff in Research and Data Analysis.  HCA revised the questions based on the fact that supplemental questions must now all be at the end of the survey.  We just learned that this afternoon.  **These supplemental questions are due to NCQA by December 19.**

1. In the last 6 months, did your child's personal doctor or anyone from that office ask you about your child's mental or emotional health?
   1. Yes
   2. No
2. Did your child receive mental health care or counseling in the last 6 months?
   1. Yes
   2. No
3. If you answered yes to question 2, did your child receive all the mental health care or counseling that he or she needed?
   1. Yes
   2. No
4. If you answered no to question 3, how much of a problem, if any, was it to get the mental health care or counseling that your child needed? Would you say it was a big problem, a small problem, or not a problem?
   1. Big problem
   2. Small Problem
   3. Not a Problem
5. If your child received mental health care or counseling in the last 6 months, how satisfied were you with the quality of mental health care or counseling that your child received?
   1. Very satisfied
   2. Satisfied
   3. Neither satisfied nor dissatisfied
   4. Dissatisfied
   5. Very dissatisfied
   6. N/A – No use of mental health care in last 6 months
6. If your child received mental health care or counseling in the last 6 months, how often were you involved as much as you wanted in your child’s mental health care or counseling?
   1. Never
   2. Sometimes
   3. Usually
   4. Always
   5. N/A – No use of mental health care in last 6 months

Thank you.  Please let me know if you have any questions or concerns.

Karen Wilson, RN

Supervisor, Quality Monitoring Unit

Quality and Care Management Section

Division of Health Care Services

Email:   [karen.wilson@hca.wa.gov](mailto:karen.wilson@hca.wa.gov)

Phone: (360) 725-2009

Fax: 360-753-7315

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