



April 20, 2011

**TO:** Honorable Commissioners, Mental Health Services Oversight and Accountability Commission (MHSOAC)

**FROM:** Patricia Ryan, MPA, Executive Director;  
Stephanie Welch, MSW, Associate Director, MHSOAC

**SUBJECT: Recommendation to Invest in Data Quality**

The members of the California Mental Health Directors Association (CMHDA) are pleased to see the MHSOAC's shift in focus to using evaluation as a critical tool to fulfill its MHSOAC oversight responsibilities. After six years of implementation, counties know that the MHSOAC is having a positive impact on their communities. However, capturing and analyzing data is essential to assuring our communities that the goals of the MHSOAC are being addressed. To do so adequately requires a resource investment that has not yet been made. This lack of quality data has also been recognized as a serious problem by the MHSOAC's evaluation committee.

One of the primary purposes of MHSOAC state administrative funds, according to Welfare and Institutions Code Section 5892(d), is to "ensure adequate research and evaluation regarding the effectiveness of services being provided and achievement of outcome measures." Given this fact, CMHDA believes that MHSOAC state administrative funds should be dedicated immediately to addressing data quality issues. Failure to do so now will continue to hamper our ability to provide the reliable and accurate data that is needed to evaluate how well counties are performing in addressing the goals outlined in the MHSOAC.

Specifically, CMHDA recommends the following:

*That the MHSOAC prioritize and devote as much of its available MHSOAC state administrative resources as possible to a contract with a third party entity to provide technical assistance to counties and their contractors, for the purpose of ensuring quality data and its use in informing practice and policy. The contractor should also support counties in submitting accurate and reliable data into the Data Collection and Reporting (DCR) system, and generating timely and meaningful reports from the DCR for a variety of evaluation purposes.*

While this might be a temporary solution, we are confident that such an investment at this time will help facilitate and support a needed shift to continuous quality improvement for our public community mental health system. CMHDA appreciates your consideration of our recommendation, and we are happy to discuss any further details.