

AGENDA ITEM: Discussion: Development Of Plan To Evaluate Disparities Statewide – Identifying Short Term Activities

ENCLOSURES: None

OTHER MATERIAL RELATED TO ITEM: None

BACKGROUND:

The Mental Health Services Act (MHSA) promotes cultural and linguistic competence and the reduction of disparities in access to services. In order to achieve these MHSA objectives, people must be served in ways that: (1) are coherent with and respectful of differing cultural views and traditions; (2) eliminate disparities in access to treatment, and quality of care, and; (3) create successful outcomes for all individuals and families being served. The Mental Health Services Oversight and Accountability Commission (MHSOAC) is charged with holding relevant entities accountable for their roles within the public mental health system. One of the MHSOAC’s guiding principles is to promote efforts to reduce and eliminate disparities in access to mental health services, as well as the quality and outcomes of those services.

Accordingly, the MHSOAC has funded evaluations that have aimed to assess racial/ethnic and cultural disparities in access to care. These efforts have primarily uncovered a number of issues with currently available data that may prevent meaningful evaluation of disparities, including missing and unavailable data within the Client and Service Information (CSI) database, which collects client-level service utilization data for those receiving services via the Community Services and Supports (CSS) component of the MHSA.

ISSUE:

The MHSOAC is committed to identifying meaningful and feasible ways to continuously monitor disparities within the public mental health system. The Commission and Evaluation Committee have been charged with developing a framework to guide forthcoming work in this area. Renay Bradley and Ashley Mills will lead a discussion that will present current challenges with existing data on disparities and will attempt to identify possible short term evaluation activities that can take place prior to fully identifying or strengthening data needed to continuously monitor and evaluate disparities in access and utilization of care, and outcomes. Ideas for short term activities generated via this process could possibly be prioritized by the Evaluation Committee to begin in fiscal year (FY) 2016/17.

This discussion is part of a yearlong effort to develop a plan to evaluate disparities statewide that will be presented to the Commission for potential adoption in early 2016.