Final Report: The Community Mental Health Fund

Jackson County, Missouri

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Study Overview

This study utilized a mixed methods research design that employed sequential data collection strategies as a planned characteristic. Three (3) domains of inquiry were identified by the Community Mental Health Fund (CMHF) for study:

- 1. Stakeholder perception of the quality of professional interaction exhibited by CMHF in day-to-day interaction with community members.
- 2. Stakeholder perception and experiences of the Value Based Payment Initiative (VBP).
- 3. Stakeholder engagement relative to social determinants/drivers of health & racial equity among CMHF grantees.

Two (2) forms of data collection were utilized: stakeholder survey and key informant interviews. The external evaluators met with internal and external stakeholders to construct the initial survey instrument. After administrative/leadership review and collaboration, an instrument was developed and deployed to capture desired information.

Following the completion of survey and analyses of both fixed and open-ended responses, a preliminary version of the report was presented to eight (8) key informants identified by CMHF leadership. These informants shed light on findings and made suggestions for future considerations.

Appendix A provides the reader with a detailed flowchart of completed research activity.

Survey Construction & Administration

The Community Mental Health Fund (CMHF) survey was opened for electronic administration to 107 pre-identified individuals on October 10th, 2022, and available for completion through October 25th, 2022. The final version of the survey was co-constructed by the external evaluators and CMHF administration and is provided (see Appendix B for the full survey) along with this series of brief reports.

Of the 107 pre-identified individuals, 61 individuals (57.0%) fully completed the electronic survey with an additional 10 individuals (9.3%) partially completing the survey. In total, 71 individuals (66.3%) accessed and completed at least a portion of the CMHF survey.

The survey was electronically administered using Research Electronic Data Capture (REDCap), a secure web application developed by the National Institutes of Health and maintained by Vanderbilt University (Harris, et al.) and designed to support data capture for research studies.

The survey instrument contains various types of questions (scaled, nominal and open-ended) across four domains: respondent information and demographics, quality of professional interaction, the value-based payment initiative, and social determinants/drivers of health.

Analyses

The external evaluators conducted univariate and simple bivariate analyses on quantitatively derived CMHF survey data. Univariate analyses were conducted on the survey variables to observe frequencies and measures of central tendency (e.g., mean, median, etc.). Univariate analyses allowed for the evaluators to further describe the survey respondents and their quantitative responses. These analyses were conducted in IBM SPSS Statistics (Version 28.0) (2021).

It is important to note that results include all valid responses for the respective question analyzed (i.e., the external evaluators included responses from both partially and fully completed surveys). Therefore, sample size (e.g., the number of respondents who answered each respective question) may vary by question. For this reason, the external evaluators included the respective sample size for each of the univariate and bivariate analyses.

Throughout the report, sample size will be designated by the letter "n", with a capitalized "N' indicating that all possible respondents (71 respondents) answered the respective question/variable, and a lowercase "n" indicating that a portion of the respondents answered the respective question.

For those survey items soliciting qualitative (open-ended) responses, the evaluators imported text responses from the REDCap database into Dedoose (version 9.0.17, 2021) for managing and analyzing qualitative and mixed methods data. Text responses were imported by original question, and thematic analysis strategies were employed to determine triangulation and summative information. Themes, density, and findings are presented in each of the three briefs that align with study questions.

For information gathered through key informant interviews, text was entered from the interviews into Dedoose and coded for thematic content.

Respondent Demographics & Information

Corresponding to Survey Section I, important respondent demographics are illustrated in this section. This information is intentionally provided first to provide a general overview of the sample who completed the CMHF electronic survey.

As shown in *Table 1,* below, respondents were primarily White (76.1%, n = 54), female (69.0%, n = 49), and serving in an administrative role (60.6%, n = 43). Each of the grantee agencies had at least one survey respondent, and, interestingly, the two most prevalent categories for *time in current job role* were: 1 year – under 3 years (26.8%, n = 19) and 10 years or more (25.4%, n = 18).

ariable	Frequency (%)
Piological Sex	
Female	49 (69.0)
Male	21 (29.6)
Prefer Not to Answer	1 (1.4)
Pace	
White	54 (76.1)
Black/African American	12 (16.9)
Asian	0 (0.0)
American Indian/Alaska Native	0 (0.0)
Pacific Islander/Hawaiian	0 (0.0)
Multi-Racial	2 (2.8)
Other	3 (4.2)
gency Affiliation- number of participants from each agency is	
dentity of those who may have been single agency invitees/res	spondents
Benilde Hall	Intentionally Blank
Budget & Financial Management Assistance (BFMA)	
Burrell	
Child Abuse Prevention Association (CAPA)	
Child Advocacy Services Center (The Children's Place)	
Cornerstones of Care	
Crittenton Children's Center	
The Family Conservancy	
FosterAdopt Connect	
Genesis	
Hope House	
Jewish Family Services	
Jewish Vocational Services	
KC CARE Health Center	
Mattie Rhodes Center	
Metropolitan Organization to Counter Sexual Abuse (MOCSA) Newhouse	
Niles Home for Children	
Operation Breakthrough	
ReDiscover	
ReStart	
Rose Brooks Center	
Samuel U. Rodgers Health Center	
Sheffield Place	
Steppingstone Swope Health Services	
SWORE ITEGILII SELVICES	

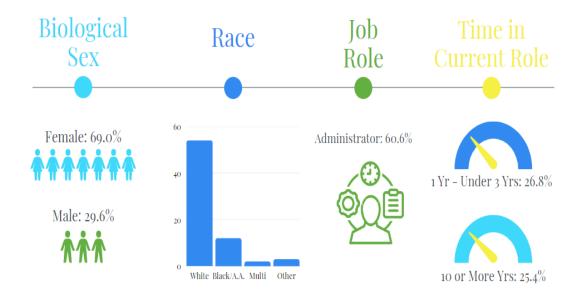
Other: Reconciliation Services	
Other: N/A	
Job Role	
Non-Clinical Case Manager	1 (1.4)
Clinical Case Manager	0 (0.0)
Supervisor – No Caseload	5 (7.0)
Supervisor – Clinical Caseload	5 (7.0)
Clinical Provider	3 (4.2)
Administrator (Do Not Provide Direct Services)	43 (60.6)
Quality Assurance/Quality Improvement (QA/QI)	3 (4.2)
Financial/Billing	1 (1.4)
Other*	10 (14.1)
Time in Current Job Role	
Less Than 6 Months	7 (9.9)
6 Months – Under 1 Year	3 (4.2)
1 Year – Under 3 Years	19 (26.8)
3 Years – Under 5 Years	11 (15.5)
5 Years – Under 10 Years	13 (18.3)
10 Years or More	18 (25.4)
Not Listed	0 (0.0)

Notes. * = Other Job Roles included: CEO (3); Administrator – Provides Direct Services, periodically (2); Grant Staff (2); Director of Programs (1); Clinical Supervisor with case management caseload (1); and Development Staff (1).

Please note: Due to a survey technology error, the researchers do not believe that respondent ethnicity was adequately captured in the survey, therefore this characteristic is not reported. U.S. Census population estimates for Hispanic ethnicity in Jackson Co, MO are 9.7%. Based on national data, Hispanics are underrepresented in the behavioral health workforce (National Academy for State Health Policy, 2021).

Figure 1, below, provides a summative overview of respondent information.

Respondent Demographics & Information



Additionally, of the 71 individuals who responded, 61 (85.9%) stated that they were "extremely familiar with CMHF and their role/engagement with the agency [they] work for", and ten individuals (14.1%) responded that they were "moderately familiar" with CMHF and CMHF's role/engagement with their agency.

References:

Dedoose Version *9.0.17*, web application for managing, analyzing, and presenting qualitative and mixed method research data *(2021)*. Los Angeles, CA: SocioCultural Research Evaluators, LLC.

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workforce/#:~:text=The%20same%20analysis%20indicates%20that,workers%20and%2064.6%25%20of%20counselors.