**Data Integration Workgroup**

**June 30, 2021**

**9:00 am – 10:00 am**

**Facilitators: Tim Marshall & Jeff Vanderploeg**

Proposed Workgroup Goals:

1. Review existing state plans and activities in cross-agency data integration
2. Broaden state agency participation in OPM P20Win initiative and/or related data integration initiatives
3. Identify key indicators and metrics of children’s behavioral health system functioning across systems/payers
4. Make recommendations to Children’s Behavioral Health Plan Implementation Advisory Board and the 12 state Department Commissioners for further follow-up and implementation

Anticipated Workgroup Duration

Monthly; up to 6 meetings

Materials:

1. *Connecticut State Date Updates* (PowerPoint slides)--Scott Gaul (OPM)
2. Other materials and resources to be considered during first workgroup meeting

Meeting Objectives:

1. Review existing state-level work in behavioral health data integration
2. Plan-out future workgroup meeting objectives, topics, materials
3. Identify workgroup co-chairs

Agenda and Minutes

1. **Welcome and Introductions**

Jeff Vanderploeg welcomed participants and provided a brief overview of the agenda for the meeting, then turned over facilitation to Tim Marshall.

1. **Overview of Workgroup Goals, Anticipated Deliverables, and Timeline**

Tim Marshall provided additional context for the workgroup, tying this workgroup’s formation back to the Behavioral Health Summit hosted by DCF a couple months ago. Tim acknowledged that there are multiple data integration efforts going on in the state and that this workgroup was not intended to be a disconnected silo from those efforts. Rather, he identified that this group would elevate and promote prominent efforts in the state and advance data integration in children’s behavioral health in a manner consistent with recommendations from the Children’s Behavioral Health Plan. He further noted that this workgroup could be influential in identifying system-level indicators of children’s behavioral health system functioning so that stakeholders could monitor Connecticut’s progress in ensuring an effective children’s behavioral health system.

1. **Overview of Principles and Current State Efforts in Data Integration and Other State Efforts: Scott Gaul, Chief Data Officer, Office of Policy & Management**

Scott Gaul presented on OPM’s efforts (in collaboration with other state agencies) in data integration. OPM has added staff for data integration projects to enhance collection, analysis, sharing, coordination, and dissemination of data. Three key initiatives at OPM include: **State Data Plan, Open Data Portal, and P20 WIN.**  Connecticut is one of few states that has a state data plan in its General Statutes, and it has three primary goals:

1) improve relevance of the open data portal and related tools;

2) ensure the data lifecycle promotes equity, particularly racial equity, and;

3) improve use of data to inform decision-making. Each of these goals has its own set of metrics and rationale (see slides for those details).

The P20 WIN initiative is an effort to inform sound policy and practice through the secure sharing of critical longitudinal data and by linking data across participating agencies. For example, P20 WIN has the capability to link data from an agency involved in service delivery (e.g., behavioral health service delivery) with data from another agency on a long-term outcome (e.g., employment). He described how state agencies, providers, or the public can make data requests to P20 WIN, and that OPM vets all requests to ensure that anyone requesting individual-level data has I.T. security in place to protect the information. The Department of Labor does the matching and linking of data.

Scott further indicated that OPM expects that requests will accelerate in the near future, as OPM has continued to enhance the relevance and efficiency of this work (to date, the system has been underutilized with about three requests per year). Scott shared a slide listing the agencies that have signed on to participate in P20 WIN (n=10 agencies;-4 are partners in the Children's Behavioral Health Implementation Advisory Board). Scott then shared a slide that listed a number of data integration initiatives occurring in other states and jurisdictions across the country, particularly those that included children’s behavioral health data.

Tim Marshall noted that P20 WIN is perhaps the most mature data integration project in the state, and has established infrastructure to build on, which is why he believes this is an important presentation for this group. Scott noted that the project still has much work to do to reach a gold standard level of implementation.

Bill Halsey responded on behalf of DSS, identifying a couple of projects that are also implementing data integration, particularly Integrated Care for Kids (InCK; Clifford Beers, lead agency). Bill noted that data will be coming from multiple sources relating to children and families in the New Haven area (e.g., services, education, child welfare, juvenile justice, etc.).

Jeff Vanderploeg asked whether there were existing or planned linkages between the InCK and P20 WIN projects. Scott indicated that InCK could be a “customer” of P20 WIN, in that InCK could make a request to P20 WIN and in turn receive merged data across systems relevant to their initiative.

Tim Marshall indicated that the children’s behavioral health system could similarly be a “customer” of P20 WIN and make various requests. Tim Marshall further noted that the data integration efforts of InCK are a good example of what is needed for the whole behavioral health system, and that P20 WIN could be very helpful in that regard.

A participant asked whether P20 WIN would limit the need for organizations involved in data integration efforts to obtain numerous data sharing agreements and more quickly obtain linked data across systems. Scott Gaul indicated that P20 WIN was close to having the capacity to do just that.

Conceivably, an organization like Beacon could make a request to P20 WIN and receive integrated data in return, assuming the request meets all of OPM’s requirements. Another participant followed by asking whether merges of archival data could ultimately be complemented by real-time data reports including routine “dashboard” reporting of integrated data. The participant also asked whether “CONNIE” data (CT’s Health Information Exchange (HIE)) would be part of the P20 WIN project. Scott Gaul indicated that P20 WIN was still far from integrating HIE data into their efforts, and that it would also take time to create dashboard reporting. However, he noted that if a group such as this one was to make a specific expression of need, it might help to advance P20 WIN so that they can accommodate dashboard reporting requests as well.

A participant asked about: a) examples of how Connecticut-based entities have successfully utilized P20 WIN, b) whether other states have gotten further along than P20 WIN, and c) how far this group expects to get toward the “gold standard” of data integration by December.

Tim Marshall clarified that this group, within six months, is charged with making recommendations for data integration, not actually achieving and/or implementing the gold standard of behavioral health data integration. Marshall noted that, for example, this group could recommend that all 12 state agencies participate in P20 WIN and that the children’s behavioral health system become a “customer” of P20 WIN, and make various data integration requests.

A couple of participants indicated that it will be very important to protect individual privacy and confidentiality in data integration efforts. Marshall indicated this was a priority for this group’s data integration efforts. Another participant noted that cross-agency data sharing can be complicated by each state agency having different definitions of data elements (specifically race, ethnicity, language and other factors). Marshall again indicated that this could be a focus for recommendations coming from this group.

1. **Identify agenda for subsequent meetings: Data, best practice approaches, resources, or presentations**

Possible next meeting topics will be culled from today’s meeting notes, and Tim Marshall and Jeff Vanderploeg will determine next steps including an agenda for the next meeting in late July.

1. **Co-chair Volunteers**

Tim Marshall asked for one public sector co-facilitator and one private sector co-facilitator for this workgroup. There were no volunteers at this time. Please consider a co-facilitation role.

1. **Adjourn**

The meeting was adjourned at 10:00 am.

Next meeting Dates:

9:00 AM -4th Wednesday of the month:

July 28th, 2021

August 25th, 2021

September 22, 2021

October 27, 2021

November 17, 2021 (3rd Wednesday of the month)