



Commission on Mental Health and Substance Abuse Data Analysis Subcommittee

Meeting Date: Wednesday, January 19, 2022

Meeting Start Time: 10:30am

Meeting End Time: 11:32am

Attendees:

- Jay Reeve
- Erica Floyd-Thomas
- Annette Christy
- Heather Flynn
- Raymond Gadd
- Sue Gallagher
- Kathleen Moore
- Paul Stiles
- Uma Suryadevara

Introductions of Subcommittee Members:

- Jay Reeve – *Chair Commissioner*, CEO Apalachee Center
- Ray Gadd – *Commissioner*, Deputy Superintendent for Pasco County Schools
- Shevaun Harris – *Commissioner*, DCF Secretary (Erika Floyd-Thomas attended on behalf of Shevaun Harris)
- Simone Marstiller – *Commissioner*, AHCA Secretary
- Kathleen Moore – *Commissioner*, USF Research Professor and Executive Director of The Florida Mental Health Institute
- Uma Suryadevara – *Commissioner*, UF Health Associate Chief for Hospital Based Services and Program Director

Advisory Staff:

- Annette Christy – USF Associate Professor and Director of the Baker Act Reporting Center at the Florida Mental Health Institute
- Heather Flynn – FSU Professor and Chair of the Department of Behavioral Sciences and Social Medicine
- Sue Gallagher – Chief Innovation Officer at Children’s Services Council (CSC) of Broward County
- Paul Stiles – USF Associate Professor and Faculty Liaison for Policy and Services Research Data Center



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Discussion Notes

Overview of Subcommittee:

Overall Vision and Goal: Identify, access and integrate data from local and state sources. Scale up to a tending data repository allowing access to statewide level prevalence data around mental health and substance abuse data in the state of Florida. Plan would be to analyze the data and provide data-based recommendations for system improvements.

Scope: Identification and definitions are needed around

- (1) types of data,
- (2) entities that will provide data,
- (3) the setup of an ongoing data system, i.e., centralized v. federated and statewide vs. setting up guidelines for local platforms.

Current Barriers:

- Data has the capacity to be shared but is currently siloed as data tends to be captured by various behavioral health funders and oversight agencies without correlation or integration at a state or local level.
- Discussion around the barriers to sharing identified data (sheriff's office, education system, behavioral health facilities, and managing entities) to assist vulnerable populations such as children.
- Individuals receive care in a variety of different settings and it's difficult to capture a 'wholistic view'.

Suggestions for Barriers:

- Develop interagency agreements for de-identified data sharing to create a single data repository.
- Develop trusting relationships between participating entities.
- Develop a statewide model detailing how data can be shared
- Research the progress of other states that have adapted data integration models/strategies (specifically around privacy and utility of the data).
- Implementing a data integration model in the state of Florida.
 - Considering universal consent of sharing information
- National Institute of Justice (NIJ) now utilize privacy certificates. Everyone funded and accessing their data, must agree to protect the data and assure that it will be used appropriately.



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Overview Questions Asked:

- Medicaid data, managing entities, and schools have been mentioned. Will there be an inclusion of other entities that have behavioral health dollars and data (DJJ, CHIPP, DOC, DOH, etc.).

Timeline:

- **Interim report due to Full Commission on September 01, 2022**
 - Including (1) meaningful data analysis between now and August 2022, (2) identify and define the problem, and (3) provide a list of recommendations for movement forward.

Items that Require Discussion:

- Scope AHCA and DCF data for integration ideas, data aggregation is important.
- Central Data Repository (at the local and state level)
- Integrating AHCA data, commercial insurance (Blue Cross), and ME data into a searchable prevalence index (utilization data) that can be intersected with other datasets (Sherriff's office, DJJ, DOC, etc.).
- Access to de-identified data to see the prevalence rates, county by county, and across the state. The pragmatic of local integrations can inform what happens at the state level.
- Fiscal discussion is needed – recommendations could include a fiscal impact within the system, but money is potentially available to be utilized at the state level.
- Do we have the capacity to make policy and system decisions based on data and not anecdotes?
- Expected recommendations will advise on data sharing and gaps within the system after taking a comprehensive look at the data currently produced by the behavioral health system in Florida.
- There is a team working Google in Miami-Dade regarding a test program for sharing data with entities (court, DOC, DJJ, etc.) within one system. Pat Smith is looking into the logistics.

Action Items (Next Steps):

- Brainstorm a pathway towards data integration for the larger government agencies that are involved in mental health and substance abuse treatment.
- Pat Smith to serve as liaison for subcommittee communication – being email responsive between meetings will be important.
- Volunteers for Research – to report at next meeting
 - Kathleen Moore, Annette Christy, Paul Stiles, Uma Suryadevara, and Heather Flynn – Gain insight on other states processes to get a baseline of state-level data system integration.
- Pat Smith to distribute the Reporting Template and Road Map (responsibilities of this subcommittee).



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Public Comment:

- No public comment

Next Meeting:

- Wednesday, March 16, 2022

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