
Developing a Data System Infrastructure to Support Mental Health Policy Analysis while Protecting Individual Privacy and Confidentiality

Paul G. Stiles & Roger A. Boothroyd

Policy and Services Research Data Center

Louis de la Parte Florida Mental Health Institute,

University of South Florida



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Working with data can be frustrating



Policy & Services Research Data Center (PSRDC)

Mission

“The Policy and Services Research Data Center (PSRDC) informs public policy and program development through the timely compilation, integration, and analysis of administrative and other data, and strives to be a leader in the management, organization and dissemination of information on health and mental health issues.”

- PSRDC is a resource for automated data collection, analysis, storage, and organization.

Current Personnel Structure

Team approach in PSRDC:

- **Administration/coordination** (2-3 people) – administers day-to-day work and coordinates all activities
- **Data Management and Infrastructure** (2-3 people) – develops and coordinates data intake, management of data and development of knowledge base and information dissemination technologies
- **Policy Analyst** (3-6 people) – conduct analyses and provide leadership for various projects – more independent than Data Analysts in that they need less supervision/assistance from PSRDC leadership and are typically on regular lines w/benefits
- **Data Analyst** (3-6 people) – new or part-time staff who conduct analyses with another staff person or faculty – typically OPS (graduate student) status
- **Affiliated faculty** – provide supervision/expertise for specific projects

Types of Data at FMHI/PSRDC

- Adult Protective Services Data
- Child Welfare/Protection Data
- Civil Commitment (Baker Act) Data
- Court Data - Pinellas
- Criminal Justice Data
- Education/Schools Data
- Emergency Medical Services – Pinellas
- Hospital Discharge Data
- Juvenile Justice Data
- Medicaid Claims and Eligibility
- Medicare Claims and Eligibility
- MH/SA Outcomes Data
- Social Service Data - Pinellas
- State MH/SA Certification and Events
- Other Data (e.g., Medicaid Mail Survey, SMI Interviews, MEPS, MDS)

Current Projects/Tools

- Have over 30 on-going projects/analyses and conduct ad hoc analyses as needed.
- Analytic software includes: SAS, SPSS, HLM modeling, GIS system.
- Primary sources of support (other than MHLP/FMHI) is contracts/grants.

Current Projects/Tools (con't)

- PSRDC Data System Organization
 - Centralized Data Management
 - Documentation and Code Standards
 - “Change” Control
 - Automation and Efficient Data Structures
- PSRDC Knowledge Base
 - Relational database mapping PSRDC processes
 - Data intake
 - Project Lifespan
 - Security issues
 - Administrative issues
 - Knowledge capture and transfer (easily accessible)

The Impact of HIPAA

- **There is a delicate balance between providing access to data for policy research/evaluation, and protection of privacy and confidentiality of individuals.**
- Covered entities [and hence their associates like the PSRDC] need to maintain reasonable and appropriate administrative, technical, and physical safeguards to ensure integrity and confidentiality, and to protect against reasonably anticipated threats, hazards and unauthorized uses and disclosures.
- Thus, PSRDC must provide as good, or better, security for data than the agencies and providers we obtain the data from.
- PSRDC has modified how it conducts research and evaluation with medical information by implementing enforceable policies, conducting training, and installing new computer technologies.

Data Management Policies

- Data procurement and use policies
(including model business associate agreements)
- Data access and security policies
- Security incident policy
- Policy for regular review of systems activity
- Procedures for enforcement of above policies

FMHI Data Network Committee (DNC)

- The DNC has the authority to:
 - develop & implement policy on data security
 - monitor, manage & improve a system of data procurement and use for FMHI
- Goal is to provide reasonable data access for research, while ensuring protection of private information against security breaches

Data Management Training

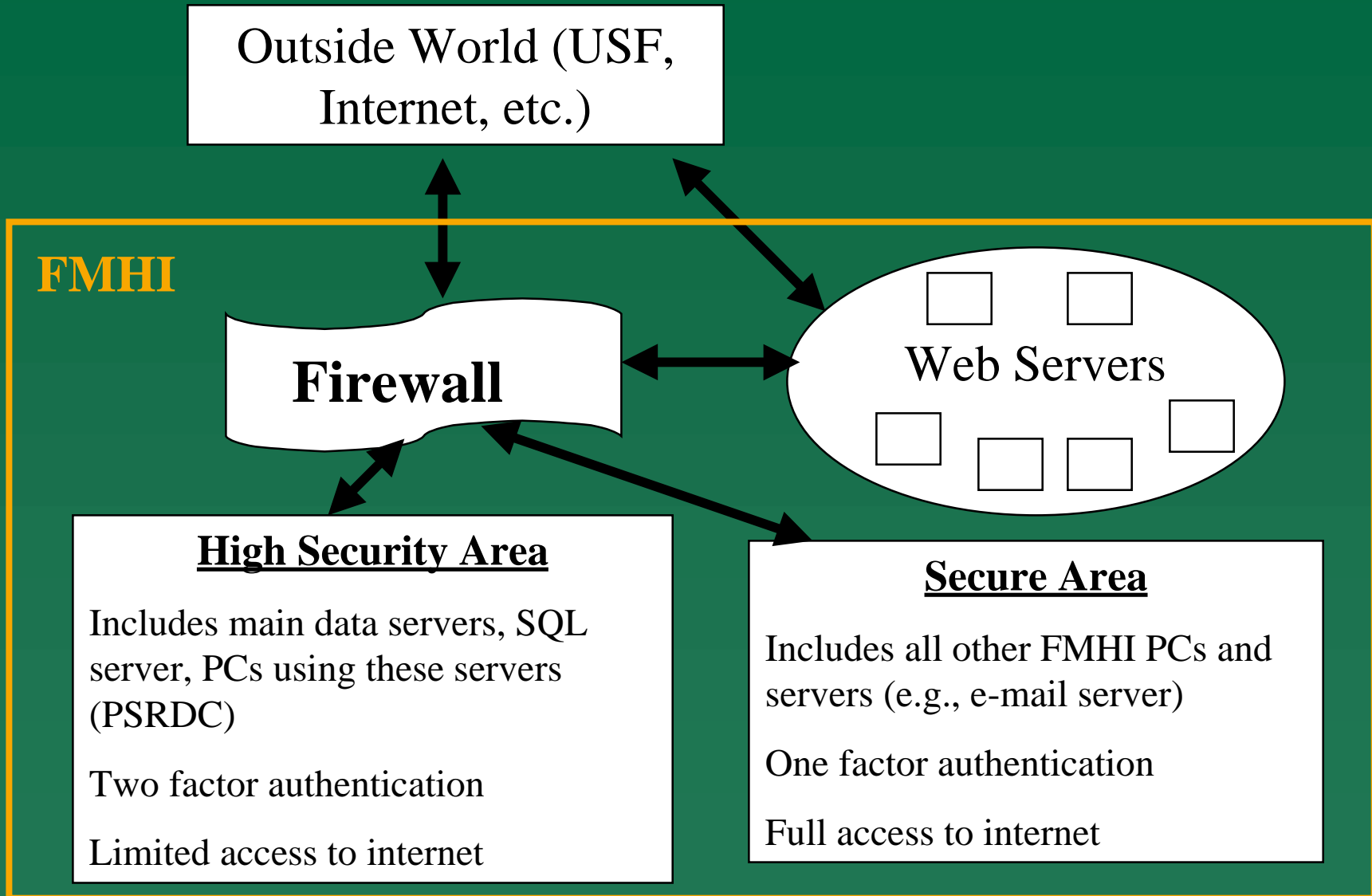
- Mandatory periodic training for all FMHI faculty and staff on HIPAA basics (security awareness training)
- On-going training for faculty and staff who use data subject to HIPAA (i.e. all people in PSRDC)

Computer Technology

Implemented by FMHI's Computer Support Center:

- Firewall Protocols (including new filtering and activity logging)
- Use of VPN for external data access
- Two-factor authentication on secured data servers
- Restructuring of the FMHI computer network based on security considerations

FMHI Computer Network Structure



Other PSRDC Activities

- Increase use of VPN with agencies in Tallahassee.
- Working out new data use agreements reflecting HIPAA issues.
- Increasing outreach to help others work with data currently in PSRDC and reposit data from additional sources.
- To increase usefulness and accessibility, we are creating integrated data sets – example: the Boothroyd 688 Data System

Boothroyd 688 Data System

- Conducted a population-based mailing to approximately 9,500 Florida Medicaid enrollees receiving SSI to identify those receiving SSI because of a mental health problem.
- Based on survey responses, contacted and enrolled 688 adult (ages 21-64) Medicaid enrollees with a severe mental illness.
- Conducted comprehensive face-to-face interviews with participants at three points in time, at intake into the study, at six months, and at twelve months.
- Conducted brief bi-monthly interviews in which respondents reported formal and informal service utilization.
- Assembled and organized data for these 688 individuals from other service and eligibility data systems (Medicaid, Civil Commitment, Criminal Justice, etc.) into an organized data system **intended to be used for cross-systems program and policy research.**

Boothroyd 688 Demographics file

- Created “final” demographics file for the 688 by combining data from multiple sources.
 - GENDER: almost complete agreement
 - BIRTHDATE: 10.2% of 688 had discrepant dates
 - RACE & ETHNICITY: 36.5% of 688 had discrepant race and/or ethnicity categorization
- Other administrative, interview and survey data is compiled from original files.

Civil Commitment and Criminal Justice System Crossover

	Civil Commitment	Criminal Justice	Both
Overall (n=688)	105 (15.3%)	133 (19.3%)	23 (3.3%)
Male (n=191)	31 (16.2%)	59 (30.7%)	12 (6.3%)
Female (n=496)	74 (14.9%)	74 (14.9%)	11 (2.2%)
African American (n=234)	27 (11.5%)	59 (25.2%)	9 (3.8%)
Native American (n=12)	1 (8.3%)	3 (25.0%)	0 (0.0%)
Asian (n=1)	0 (0.0%)	0 (0.0%)	0 (0.0%)
Caucasian (n=374)	65 (17.4%)	55 (14.7%)	13 (3.5%)
Other/Mixed (n=67)	12 (17.9%)	14 (20.9%)	1 (1.5%)

Contact Information

Roger A. Boothroyd, Ph.D.

Department of Mental Health Law & Policy
Louis de la Parte Florida Mental Health Institute
University of South Florida
13301 Bruce B. Downs Boulevard
Tampa, FL 33612
Voice: 813-974-1915
Fax: 813-974-9327
E-mail: boothroy@fmhi.usf.edu

Paul G. Stiles, J.D., Ph.D.

Department of Mental Health Law & Policy
Louis de la Parte Florida Mental Health Institute
University of South Florida
13301 Bruce B. Downs Boulevard
Tampa, FL 33612
Voice: 813-974-9349
Fax: 813-974-6411
E-mail: stiles@fmhi.usf.edu

Internet Address: psrdc.fmhi.usf.edu