Linking Criminal Justice and Behavioral Health Data for Informed Decision-Making

### Proposal

To establish a routine process that streamlines the linking of administrative data including:

- arrest (DPS),
- incarceration and parole (DOC/BOPP),
- adult probation (JB-CSSD), and
- behavioral health (DMHAS) records.

For the purpose of creating a <u>contemporaneous</u>, <u>de-identified</u> data set used for program evaluation, services research and informed policy making.

State agencies and Judicial have engaged in numerous data sharing efforts over the past decade.

- CGS 17a-451(o) requires OPM and DMHAS to provide the General Assembly with a report on substance abuse service effectiveness.
- Reporting of National Outcome Measures regarding behavioral health services and criminal justice involvement.
- Ad hoc studies with university-based research organizations.

# **Data Matching Process**

Method for linking administrative records across state agencies is well established.

- Uses person identifiers such as first/last name, Social Security number, date of birth, and gender.
- Based on a threshold or cut point of matching variables that result in "definite", "possible" and "no" matches (probabilistic matching).
- Allows for visually inspect of possible matches that are within a certain tolerance, e.g. those with a transposed SSN (deterministic matching).

## **Benefits to Stakeholders**

Establishes a routine process for linking criminal justice and behavioral health records.

- Reduces the redundant efforts required to respond to individual study requirements.
- Provides ongoing access to a de-identified analytic data set that is more responsive to the needs of advisory bodies, decision makers and state agency administrators.
- Positions CT with a competitive advantage when applying for funding that requires data sharing.

### Examples of uses

Resulting data set may be used for routine reports as well as special studies, for example:

- Track the time lapse between prison discharge and admission to behavioral health services.
- Assess the continuity of care between in-prison behavioral health programs and community-based care upon re-entry.
- Evaluate the impact of behavioral health programs on criminal recidivism.
- Examine psychiatric and substance abuse diagnoses by crime types.

#### **Resources and Timeline**

Resources exit within the participating agencies to accomplish the first phase of the initiative by January 2011.

- DOC, CSSD and DMHAS all have evaluation and/or research staff qualified to extract the requisite data, perform the data matching and create a de-identified data set.
- Cross agency, the CJPAC Research Work Group can provide the infrastructure for a <u>steering</u> <u>committee</u> to develop the MOA, determine which data items to include, establish proper documentation, recommend linking methods in compliance with state/federal laws, and suggest routine reports.

## **Resources and Timeline**

Full application of the analytic data set will require further discussion.

- Costing out special studies of importance to the CJPAC, ADPC and other interagency stakeholders.
- Assuring that there is appropriately qualified staff for the analysis of the data and interpretation of the findings.
- Including data sets housed in other state or nonprofit agencies such as the Department of Labor's wage data or the Coalition to End Homelessness for the purpose of specialized studies.