

Mental Health Transformation State Incentive Grant  
Update: May 2007

A core principle of the Mental Health Transformation State Incentive Grant is to ensure that a transformed system of mental health care service delivery is a system that is culturally competent and sensitive to the diverse needs of its users. No mental health system that holds out recovery and resilience as the ultimate goal can reach that goal unless it can ensure that all its citizens, including minorities and residents in rural and geographically remote areas, have access to services that are culturally welcoming.

One barrier identified by Work Group 3 of the Transformation initiative is that in Connecticut we lack the information that would tell us where and the extent to which the disparities in mental health care exist. The state does not collect that information in a consistent way across all state agencies and the Judicial Branch. In a large mental health system, data collection is the only way to ascertain with any certainty where the gaps are. We must be able to better assess the strengths and gaps in care for diverse populations and determine the extent to which staff diversity matches the diversity of individuals in recovery.

In Connecticut, each of the 14 state agencies and the Judicial Branch that have signed the Transformation Memorandum of Agreement has articulated a goal to provide services in a culturally competent way. Work Group 3 has outlined how these agencies can collaboratively establish and use common variables and data definitions related to cultural competency and disparities in mental health care.

Workgroup 3's primary goal is to **develop an integrated information system across agencies, the judicial branch, their providers and payers that establishes a uniform data collection system and uses common variables and data definitions** to facilitate identification, monitoring and elimination of behavioral health disparities.

To carry out this goal Workgroup 3 has proposed developing an Online Integrated Data System that links state agencies, the judicial branch, providers and payers, and functions as a data warehouse that will allow for a variety of analyses to be conducted on client demographic, performance and outcome data across linked agencies. Thus, based on demographics such as race and ethnicity, for instance, database users will have the capacity to conduct analyses and track performance and outcome data for clients who have received services in multiple state systems. An additional benefit of the Online Integrated Data System is that database users will be able to explore a wide range of disparities related questions within and across State agencies, and will be able to explore more general questions related to client service utilization and outcome patterns. Given the longstanding and persistent nature of behavioral health disparities, and the fact that their causes are multidimensional in nature, it is anticipated that being able to conduct such nuanced analyses on key client demographic, performance and outcome data within and across agencies and State systems, will lend to a more clear understanding of: 1) the systemic correlates of behavioral health disparities, 2) interventions that are more and less effective in eliminating disparities and increasing systems cultural competence, and

3) ways in which data can be used to inform policy development and cross-system, cross agency interventions geared towards eliminating behavioral health disparities.

Work Group 6 has also identified an approach to transform the mental health system in Connecticut by empowering individuals in recovery and families that is grounded in advanced communication and information technology. Building from an effort initiated by Connecticut lawmakers to put technology to better use in the mental health field, Work Group 6 is currently implementing **Connecticut's Network of Care**, a single resource web site to provide timely access to mental health care information and assistance for children, adolescents and adults." The web site will include a directory of services and providers and will have information about the latest mental health diagnoses and treatments; links to national and state advocacy organizations; and summary information on federal and state mental health law, including private insurance coverage. Finally, the web site will offer an optional, secure personal folder for users to manage their own care and assistance portfolios. The web site will provide culturally responsive information in 8 different languages including American Sign Language and has the capability of providing information in others most commonly used by Connecticut residents.

Ensuring easy access to information will help foster continuous, caring relationships between individuals in recovery and mental health providers. Technology can strengthen these relationships by electronically linking multiple service systems, allowing individuals in recovery to update and manage their own care records, and providing easier access to more complete medical histories. Providers will be able to deliver care that is more coordinated and responsive, and grounded in the best practices and research. Making the most of technology is essential if the state is to achieve its overarching transformation goal: To empower individuals in recovery, their families and providers to use the best and latest information as they create and use services that are recovery- and resilience-oriented.