

TPCH Data Sharing Policies and Procedures

Introduction:

The TPCH Data Sharing Policies and Procedures were created based on the CoC approved “Pima County: HMIS Data Sharing Plan” approved by TPCH board on February 24, 2015. The following policies and procedures shall be incorporated into the TPCH HMIS Policies and Procedures to formalize the data sharing practices of the CoC. These Data Sharing Policies and Procedures are designed to stand alone, however the referenced TPCH HMIS Policies and Procedures also need to be updated. Specific agreements will be edited to comply with these new Data Sharing Policies and Procedures.

The TPCH Data Sharing Policies and Procedures will be implemented in a two phase process:

- Phase I: providers NOT covered by HIPAA
- Phase II: providers covered by HIPAA and data deemed sensitive by the TPCH HMIS Committee

The existing data sharing agreements, policies, procedures and consent protocols are a much less progressive set of policies as the HMIS Data Sharing Plan establishes much greater access to shared data across the Continuum of Care. The Data Sharing Plan has a specific orientation toward using client data in HMIS for informing referrals through the Pima County Coordinated Entry System.

Three of the five principles outlined in the HMIS Data Sharing Plan relate to the sharing of client data, including protected health information. These principles are:

- TPCH HMIS will share client service history (known in HMIS as Client Project History) with some exceptions globally throughout the system
- TPCH HMIS will share the entire VI-SPDAT assessment, the VI-SPDAT acuity score and client contact information globally throughout the system
- TPCH HMIS will share Universal Data Elements (UDE) and Project Specific Data Elements (PSDE) information with some exceptions globally throughout the system

Client service histories, VI-SPDAT assessments, and HUD HMIS UDE and PSDE all can contain identifiable client-level protected information. Pima County will begin sharing this data once these policies are in effect and the correct client consent language is included in the release. Note that no data will be shared retroactively, only from the client consent forward.

Sharing a client’s service history may disclose HIV/AIDS status, mental illness, or domestic violence victimization, all of which are considered protected. VI-SPDAT and PSDEs also contain highly sensitive information, and cannot be shared without informed written consent by the client. Progressive engagement should be utilized as a case practice, and the HMIS data that is collected should support this model in order to build a single client record over time.

Universal Data Sharing Principles:

TPCH requires baseline data sharing of certain HMIS data elements to aid in the de-duplication process. This universal data sharing principle applies to all agencies and programs that access HMIS. These data elements which consist of a subset of UDE are shared globally throughout the system administratively, so that each client has only one record in HMIS. This level of data sharing occurs when the client consents to be entered into HMIS and occurs automatically.

The data elements universally shared in HMIS:

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- UDE 3.1: Name
- UDE 3.2: Social Security Number (Last 4 Digits)
- UDE 3.3: Date Of Birth
- UDE 3.7: Veteran Status

HMIS Client Consent

TPCH collects data in HMIS to understand the nature and scope of homelessness. In order to better coordinate client care, TPCH utilizes a comprehensive TPCH Client Consent Form to allow for the sharing of HMIS data.

This consent form clearly outlines what data will be shared and the purposes of sharing data. The TPCH client consent form meets the guidelines set forth by HIPAA and clearly states the following:

- Client data is collected in HMIS to coordinate care for individuals and families accessing the CoC services
- Client data is shared when a client signs the TPCH Client Consent Form and the data is entered into HMIS (data sharing does not occur retroactively)
- If the client does not sign the TPCH Client Consent Form, client data will not be entered or shared in HMIS
- The TPCH Client Consent Form details all of the data shared in HMIS (detailed in the Client Consent Data Sharing Principles section)
- The TPCH Client Consent Form will be signed by each client at least annually and collected by each program and agency that is still actively working with the client
- The TPCH Client Consent form will be scanned and uploaded in HMIS for data sharing monitoring purposes (the signed client consent does not need to be shared throughout HMIS)
- The TPCH Privacy Posting must be posted at all HMIS intake locations including non-traditional HMIS intake locations (street outreach)
- The TPCH Client Consent Form details the agencies and programs that will have access to HMIS shared data
- The client determines when data sharing will or will not happen, not the agency, program nor CoC
- The TPCH Client Consent Form details other uses of client-level data that is permissible beyond coordination of care including: research, evaluation, HMIS monitoring and aggregate reporting purposes

Client Consent Data Sharing Principles:

TPCH requires client consent to share the following data elements. These data elements which consist of a subset of UDE, PSDE and VI-SPDAT are shared at the discretion of the client. A valid signed client consent for will allow for these data elements to be shared throughout HMIS. Client will consent to share all of these data elements with all of the HMIS participating agencies in HMIS

The data elements shared by client consent in HMIS fall into the following categories:

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- Client Project History (Client Service History from the approved Data Sharing Plan):
 - Project Type
 - Service Provider Agency & Project
 - Service Type
 - Program Entry and Exit Dates
 - Need Type
- Case Notes: The case notes will only be shared on a case-by-case basis
 - Case Manager
 - Service Provider Agency & Project
 - Date
 - SPDAT/F SPDAT Measurement Tool
 - Case Note Content
- Coordinated Assessment:
 - VI-SPDAT Assessment
 - Interviewer's Name
 - Service Provider Agency & Project
 - Date & Time
 - Location
 - Language
 - Client Nickname
 - A: History of Housing and Homelessness (3 questions)
 - B: Risks (6 questions)
 - C: Socialization and Daily Functions (5 questions)
 - D: Wellness (13 questions)
 - VI-SPDAT Acuity Score

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- Call Point/Back Page Contact information (pending update by CE Committee) and Client Contact Information
 - Citizenship Status
 - Sex Offender Registration Status
 - Diagnosis of Disabling Condition (?)
 - Regular location and day to locate
 - Phone Number
 - E-mail Address
- Other HMIS Data:
 - UDE 3.4: Race
 - UDE 3.5: Ethnicity
 - UDE 3.6: Gender
 - UDE 3.8: Disabling Condition (Phase 2)
 - UDE 3.9: Residence Prior to Project Entry
 - UDE 3.10: Project Entry Date
 - UDE 3.11: Project Exit Date
 - UDE 3.12: Destination
 - UDE 3.13: Personal ID
 - UDE 3.14: Household ID
 - UDE 3.15: Relationship to Head of Household
 - UDE 3.16: Client Location
 - UDE 3.17: Length of Time on Street, in an Emergency Shelter, or Safe Haven
 - PSDE 4.1: Housing Status
 - PSDE 4.2: Income & Sources
 - PSDE 4.3: Non-Cash Benefits
 - PSDE 4.4: Health Insurance

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- PSDE 4.5: Physical Disability (Phase 2)
- PSDE 4.6: Developmental Disability (Phase 2)
- PSDE 4.7: Chronic Health Condition (Phase 2)
- PSDE 4.8: HIV/AIDS (Phase 2)
- PSDE 4.9: Mental Health Problem (Phase 2)
- PSDE 4.10: Substance Abuse (Phase 2)
- PSDE 4.11: Domestic Violence
- PSDE 4.12: Contact
- PSDE 4.13: Date of Engagement
- PSDE 4.14: Services Provided
- PSDE 4.15: Financial Assistance Provided
- PSDE 4.16: Referrals Provided
- PSDE 4.17: Residential Move-In Date
- PSDE 4.18: Housing Assessment Disposition
- PSDE 4.19: Housing Assessment at Exit
- TPCH Required Data Elements
 - Military Branch
 - Military Service Era Information
 - Discharge Type
 - Highest Level of Education Attained

HMIS Data Release

Client-level data within HMIS is managed and administered by the Pima County Community Services, Employment & Training Department. Client level data within HMIS is owned by the client and shall be added, edited and shared by the client.

HMIS data will be released to stakeholders in aggregate form for purposes of planning and evaluation, reporting purposes (RHY) without the approval of the client, agencies, programs, nor the CoC. HMIS data will be released in client-identifiable form for SSVF reporting purposes to the VA Data Repository as required by the Department of Veterans Affairs.

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Other identifiable data sets will not be released from the HMIS without approval of the TPCH HMIS Committee. The TPCH HMIS Committee will make a formal decision when client –identifiable and aggregate data that requires more than 5 hours of HMIS Lead Agency time to develop is requested.

HMIS Participating Agency Agreement

HMIS participating agencies are required to sign an HMIS Participating Agency Agreement. This agreement provides the framework for sharing data amongst HMIS participating agencies. Failure to sign the HMIS Participating Agency Agreement will prevent agency level access to HMIS.

The HMIS Policies and Procedures related to Agency Agreement and responsibilities detail:

- The agency-level applicability of HIPAA, 42 CFR Part 2, that determines what data is shared and how that data is handled
- Agency-level access will be determined for non-traditional HMIS organizations that are involved for Coordinated Entry System purposes. If the agency does not enter UDE and PSDE, access to this data will be restricted to the information that is shared universally across the system. This access will specifically allow these organization to access (in read only):
 - Services and referrals,
 - VI-SPDAT scores
 - Basic demographic information (Name, Social Security Number, Date of Birth, Veteran Status, Race, Ethnicity and Gender)
- The agency acknowledgement of their responsibilities to collect HMIS data in accordance to the HMIS Data Sharing Policies and Procedures
- The agency responsibility and ramifications for failure to follow the HMIS Data Sharing Policies and Procedures
- The agency will be subject to the following procedures for violations of the data sharing policies and procedures that will be progressive in escalation:
 - One minor violation (sharing data that was not covered by the client consent) will cause the HMIS Lead to email the organization and the CoC Board reporting the violation
 - Two or more minor violations (sharing data that was not covered by the client consent) will cause the HMIS Lead to email the organization and the CoC Board reporting the violation AND deactivate agency level access to HMIS until HMIS re-training can be completed
 - One major violation (sharing data without client consent) will cause the HMIS Lead to email the organization and the CoC Board reporting the violation AND deactivate agency level access to HMIS until HMIS re-training can be completed
 - Two or more major violations (sharing data without client consent) will cause the HMIS Lead to email the organization and the CoC Board reporting the violation AND deactivate agency level access to HMIS until HMIS re-training can be completed AND be included in the CoC rating and ranking process as a deduction from the total score
 - Two or more minor or major violations will result in agency revocation of access to HMIS with a full report from the HMIS Lead being sent to the CoC Board for a decision on further HMIS Access and a Corrective Action Plan being developed