CARES

WHY SHARE DATA?	HOW TO SHARE DATA
- Supports coordination of services - Leads to more informed referrals and service delivery - Allows for better program and system analysis to help improve performance and outcomes - Reduces the cost of duplicating data collection for provider - Improves transparency and accountability - Reduces the time and emotional impact on the client due to repeatedly sharing information. - Improves the quality of aggregate data	Recognize that good data (in quality and usefulness) requires good input. - Obtain consent - Understand the need to share data and why you are collecting the information - Follow instructions to assure data is entered correctly - Encourage data sharing - Check data regularly for errors and omissions - Report duplicate data and errors immediately - Enter new and corrected information as soon as possible after obtaining it - Do NOT deny services if a client refuses to share data

ASSURE DATA PRIVACY

- Assure you are collecting, entering, and accessing data on a need to know basis
- Follow all data security policies and protocols
- Obtain consent
- Do NOT share data that can place a vulnerable client at a safety risk
- If a client terminates or changes data sharing rights, with one or more agencies, update immediately in HMIS
- Adhere to privacy and confidentiality guidelines

WHAT DATA MAY BE SHARED	WHAT DATA WILL NOT BE SHARED
- Names - Basic household demographics - Homeless status and history - Disability status – non-specific - Veteran status including discharge status - If you are a victim of domestic violence - General health history - Other program eligibility screening information - Contact information - Date of birth - Household information (i.e. size, names)	- Mental health or medical case notes - Police reports - Hospital or inpatient treatment records - Any information that would violate HIPPA or VAWA regulations - Anything the client requests NOT be shared